

ENGINEERING

SUMMER ACADEMY at PENN

PARENT PERMISSION FORM

My son/daughter, _____, is a participant in the 2023 Engineering Summer Academy at Penn (ESAP).

I have carefully read, understand and have signed the Summer Program Participant Agreement. I also have carefully read and understand the terms of this permission form and have had the opportunity to ask any questions I may have.

I hereby give my permission for my child to participate in the program, and any and all of its activities, and agree to release, indemnify, and hold harmless the University of Pennsylvania from and against any claim which I or my son/daughter or any other person may have for any losses, damages or injuries arising out of or in connection with my child's participation in the summer program, including but not limited to injuries arising out of negligence. It is agreed that my child's participation is adequate consideration.

I consent to the collection of data, for the use and benefit of the program, regarding my child's registration for and participation in the program, including but not limited to identifying information, account information, technical information regarding my device(s), and analytical data, pursuant to the privacy policy or policies of the software used to conduct the program.

I further grant the University of Pennsylvania the right to take, copyright and use, re-use, exhibit, distribute, publish and republish (both in printed form and electronically) any and all images, video and audio recordings of my son/daughter participating in ESAP 2023. I understand that participants will not be identified by name in such photographs without further explicit permission in writing.

I understand that photographs, video recordings or audio recordings may be taken of me or my child during my participation in this summer program by employees, students, or agents of the Trustees of the University of Pennsylvania and may be used in connection with the University of Pennsylvania's quality control or distribution or promotion of its academic and public service programs to the general public. I authorize the University of Pennsylvania to copy, exhibit, publish or distribute any and all such images and audio of me or my child, for purposes of distributing or publicizing University of Pennsylvania programs or for any other lawful educational purpose. In addition, I waive the right to inspect or approve the finished product, including written copy, wherein my or my child's likeness appears.

COVID-19 Addendum: My permission as granted hereby includes an acknowledgement that due to the ongoing nature of the COVID-19 pandemic, changes to program rules, elements, scheduling, and/or individual participant eligibility requirements, and/or program cancelations, may need to be made by the University of Pennsylvania and/or its agents from time to time in the light of changing conditions; and my consent given hereby includes my consent to such responsive changes and/or cancelations implemented by the University. I acknowledge and agree that the University retains the right in its reasonable discretion to determine if and when program changes and/or cancelations warrant the issuance of any full or partial refund. I understand the risks to me, my family, and my child associated with the transmission of respiratory disease, including but not limited to COVID-19, and my agreement to release, indemnify, and hold harmless the University encompasses health and/or safety risks relating in whole or in part to such disease.

Participant Name

Parent/Guardian Name

Participant Signature

Parent/Guardian Signature

Date Signed

Date Signed