

Media Release:

By signing your child up for this program, you authorize ScienceWorks to photograph and/or videotape your child for publicity purposes (including visits from news media and photos on our website).

ScienceWorks will not release any personal information regarding your child. These materials will be the property of ScienceWorks, not to be sold or loaned and will be used only to promote ScienceWorks programs.

If you do not wish your child to be photographed, please contact education@scienceworksmuseum.org.

Walking Travel Release:

ScienceWorks may take short walking trips away from the museum when weather permits. Please note your understanding and permission for your child to participate in short walking trips as part of the program.

Trips will be conducted during the session and students will return in time for sign out and pick up.



Tool Use Waiver and Release of Liability

Waiver and Release of Liability:

In consideration of being permitted to use the tools and equipment at ScienceWorks I, the undersigned participant, acknowledge and agree as follows:

- 1. I understand that working with tools and equipment can be inherently dangerous and may involve risks, including but not limited to cuts, burns, electrical shock, falls, and other injuries. I acknowledge that I will follow all instructions and policy on the proper use and safety precautions associated with the tools and equipment at ScienceWorks.
- 2.I hereby release, discharge, and hold harmless ScienceWorks Hands-On Museum, its owners, employees, agents, and affiliates (collectively, "Releasees") from any and all liability, claims, demands, actions, or causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, while using ScienceWorks's tools and equipment, whether caused by the negligence of the Releasees or otherwise.
- 3.I understand and agree that this waiver and release of liability extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown, arising directly or indirectly from my use of ScienceWorks's tools and equipment.
- 4. I understand I shall be financially responsible for any and all damages done to ScienceWorks tools and equipment caused by misuse or failure to follow all rules, policies, procedures, and restrictions.
- 5.I expressly agree that this waiver and release of liability is intended to be as broad and inclusive as permitted by the laws of the state of Oregon and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.
- 6.I have carefully read and voluntarily signed this Tool Use Waiver and Release of Liability, and I understand its terms and legal significance. I am aware that by signing this document, I am giving up certain legal rights and remedies that may otherwise be available to me.

| In consideration of (minor's name)_ | being permitted by | У |
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| and facilities, I further agree to inde | o participate in its activities and to use its equipmennify and hold harmless ScienceWorks from any achalf of, Minor(s) and which are in any way conne | and all |
| with use or participation by minor(s | | |
| Parent/Guardian Printed Name: | | _ |
| Signature: | Date: | |