

## RG Parent/Guardian Permission Form

American Mensa and Gulf Coast Mensa value the attendance of gifted youth at our Regional Gatherings and encourages participation by members and guests of all ages. In order to ensure safe participation of those under 18, we ask that all parents or legal guardians of our young attendees complete the following information. Please complete the form, print it out, sign it, and return it to us via email. Alternately, you may print it out and bring it to the RG, although that will slow your registration process.

My minor child(ren), listed below, has/have my permission to participate in RG-sponsored youth programs as well as other RG programs that are available to attendees of all ages.

I understand that I am responsible for my child during the event and release American Mensa Ltd. and its members, staff and officers as well as the member-host of this event ("Mensa") from any liability for any harm to my child/children suffered during or as a result of participation in this event. I understand that if my child is under the age of 13, I must remain on site when my child is attending youth programs at the RG.

Should my child(ren) be exposed to topics or language of an adult nature through general interaction during RG programming, I release Mensa from any liability for any harm alleged to be caused by this participation.

I grant to American Mensa, Ltd., Gulf Coast Mensa, Inc., and their assigns, licensees and successors, the right to use my child's image and first name for the following purposes:

- Internal public relations efforts (such as the *Mensa Bulletin* or Local Group newsletters),
- External public relations and marketing efforts.
- American Mensa Web site (or those of Local Groups), in perpetuity.

| Name(s) of my minor child(ren):   |      |
|---|------|
| Parent/legal guardian:  |      |
| Attending guardian if applicable:   |      |
| Allergies or additional remarks:  |      |
| Membership number of parent, guardian or child if applicable:                                   |      |
| In case of emergency, Mensa is authorized to secure proper treatment until I can be reached. Du | ring |
| the event, I may be reached at phone #  |      |
| Parent/guardian's signature:  |      |
| Date:   |      |