

Student Agreement / Parent Permission Form

What: **Howard S. Wrihat Career Day**
Date: **Thursday, December 7, 2017**
Check-in time: 8:45 am **Start/end time:** 9:00-1:30 pm
Registration closes: *when filled*
Meeting location: Howard S. Wright, 1455 NW Irving Street, Suite 400)
Transportation: Students are responsible for their own transportation to and from the event.
Please note: Lunch will be provided. Students should wear long pants and comfortable, low heel, closed toe shoes and a coat/jacket depending on the weather.
 Visit www.portlandworkforcealliance.org/events for more information.
For more information: **Students** should direct questions to their School Contact (career coordinator or teacher)
 School Contacts should direct questions to PWA staff (susan@portlandworkforcealliance.org)

By signing below the student and parent/guardian acknowledge the following:

- The student will attend and participate fully in activities and the entire program.
- The student will not be allowed to leave the premises or leave early; attendance will be taken periodically.
- The student agrees to conduct him/herself appropriately as representatives of his/her school.
- The student agrees to show respect for PWA and event staff, school personnel, and other students.
- The student will dress appropriately for the event. (See “What to wear” above.)
- The parent/guardian gives permission for the student’s picture or video to be taken at the event and for those photos or recordings to be used for promotional and educational purposes.
- The parent/guardian gives permission for the student’s name to be included on the participant roster that will be distributed to school contacts.
- Portland Workforce Alliance and other involved companies (named above) have no liability for this activity. Each participant is responsible for his/her own safety and agrees not to look to PWA or other involved parties with regard to liability for any claims related to participation in activities at the event.

| STUDENT | |
|---|---|
| Student Name (Print): | School: |
| Grade: <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 | Best way to reach you: <input type="checkbox"/> Cell phone <input type="checkbox"/> Email |
| Cell phone: | Email (Print clearly): |
| Student signature: | Date: |
| PARENT/GUARDIAN PERMISSION | |
| Parent/Guardian Name (Print): | Day phone: |
| Alternate emergency contact name: | Day phone: |
| Parent/Guardian signature: | Date: |
| SCHOOL CONTACT ENDORSEMENT | |
| School Contact Name (Print): | School job title: |
| Day phone: | Email (Print clearly): |
| School contact signature: | Date: |

Email completed form to PWA staff (susan@portlandworkforcealliance.org)