



## Student Permission Form

*This permission slip is required for participation in any Assemble programming. Forms **MUST** be **completed** and **submitted** to Assemble prior to your child attending an Assemble program or class. Please make sure to sign all waivers prior to your child's attendance.*

### **STUDENT INFORMATION** *(one form per child)*

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_  
*(First name) (Last name)*

Address: \_\_\_\_\_  
*(Number, Street, and Apt #) (City, State, Zip)*

Student's Current School: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Birthdate: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
*(Month) (Day) (Year)*

Student Phone Number (if any): \_\_\_\_\_ Student Email (if any): \_\_\_\_\_

**Student's racial background is (please check all that apply):**

African American/Black  American Indian/Alaskan Native  
 Asian American/Pacific Islander  Indian  Caucasian/White  
 Multi-racial  Other (specify) \_\_\_\_\_

Student's ethnic background is (please check one):

Hispanic or Latina  Not Hispanic or Latina

Student's gender:

Girl  Boy  Nonbinary  Other \_\_\_\_\_

Program Session: Fall2019\_\_\_\_ Spring 2020\_\_\_\_

**Program/s (check all that apply):** Girls' Maker Night(grades 5-8) \_\_\_\_ Youth Maker Night\_\_\_\_  
Tuesday Afterschool (grades 6-8) \_\_\_\_ Wednesday Afterschool (grades 3-5) \_\_\_\_  
Thursday Afterschool (grades 1-2) \_\_\_\_ Saturday Crafternoons or M3 (grades 1-5) \_\_\_\_  
Day Camp \_\_\_\_ Hack the Future (grades 9-12) \_\_\_\_ Summer Camps\_\_\_\_ Learning Parties\_\_\_\_

## **PARENT/GUARDIAN INFORMATION**

**Parent/Guardian Name:** \_\_\_\_\_  
(First name) (Last name)

**Parent/Guardian Name:** \_\_\_\_\_  
(First name) (Last name)

**Address (if different from student's):** \_\_\_\_\_  
(Number, Street, and Apt #) (City, State, Zip)

**Parent/Guardian Cell Phone Number (1):** \_\_\_\_\_

**Parent/Guardian Cell Phone Number (2):** \_\_\_\_\_

Is it OK to text reminders and updates about the program (check one)?  Yes  No

**Parent Guardian primary email address:** \_\_\_\_\_

### **How did you hear about Assemble? (check all that apply)**

- Google or other search engine  Word of Mouth  
 My child's school  At a PTO or other parent's group meeting  
 Online Events Calendar: \_\_\_\_\_ (which one?)  
 Blog/website: \_\_\_\_\_ (which one?)  
 Other (please specify): \_\_\_\_\_

Yearly household income (total income of everyone in the house where the child lives – check one):  
 \$0-\$26,999  \$27,000-\$55,999  \$56,000-\$74,999  \$75,000+

Number of people in the household where the child lives, including yourself (circle one):  
2 3 4 5 6 7 8 9 10 more than 10

## **EMERGENCY CONTACT/HEALTH INFORMATION**

In the event of an emergency when the parent(s)/guardian(s) is unavailable, please notify the following person:

**Name:** \_\_\_\_\_ **Relationship to child:** \_\_\_\_\_

**Cell phone:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_

### **EMERGENCY HEALTH INFORMATION**

This information is necessary in case of an emergency. In the event of a serious injury or illness, Assemble students will be taken to Children's Hospital unless otherwise specified.

Name of Family Doctor: \_\_\_\_\_

Doctor's Phone Number: \_\_\_\_\_

**Does your child have any health related issues that would be important for Assemble to know about during your child's attendance to Assemble programs?**

No: \_\_\_\_\_

Yes: (please explain):

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**How can we better assist your child? Do they require any accessibility needs or other support?**

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**Does your child speak any languages other than English?**

No: \_\_\_\_\_

Yes: (please list the language/s)

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**Will your child need a translator or other language assistance to better understand the materials in our programs?**

No: \_\_\_\_\_

Yes: (please explain how we could better assist your child)

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## **ALLERGIES**

### **Assemble's Allergy Policy**

For the safety of the children we serve, we ask that parents disclose any important information about any known allergies. Please indicate the level of severity if an allergy is present as well as any precautions that must be taken to ensure the safety of your child.

**\*\*\*Assemble is a PEANUT FREE ZONE \*\*\***

Known Allergies: \_\_\_\_\_

Requested Precautions:

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***EpiPen Policy:*** Children who must carry an EpiPen are encouraged to bring an EpiPen from home to use in the event of an emergency. It is always important for parents of children with EpiPens to notify your child's Assemble teacher of the EpiPen and requested procedures regarding use of EpiPen by the child.

**PERMISSION FOR MEDICAL TREATMENT:** I hereby give Assemble permission for my child to receive First Aid Medication (Band Aids, Tylenol, Benadryl etc...) and emergency care in the event of an emergency.

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**(Parent/Guardian Signature)**

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**(Date)**

## **DROP OFF AND PICK UP INFORMATION AND POLICIES**

Assemble classes are designed to begin and end at a particular time. As such, we request that you please ensure that your child arrives at the start of the program and is picked up promptly at the end. Assemble does not provide transportation for children to and from any programming. *\*Parents are not required to stay for the duration of Assemble programs.* Children may be dropped off at the start time, and picked up at the end time. Children **MUST** be signed in and out by a parent or guardian for every program unless parents give explicit permission for the child to sign in and out.

### **How will your child be getting to and from Assemble?**

Walk  Public Bus  Picked up by Parent/Guardian/Emergency Contact  
 Picked up by (in addition to parent/guardian/emergency contact):

The following adult(s), in addition to Parent/Guardian and Emergency Contact, also have permission to pick up my child:

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

If your child is old enough to sign in or out (ages 11 and older), do you give permission for your child to do so?  Yes  No

## **PHOTO, AUDIO AND VIDEO PERMISSION AND RELEASE FORM**

For good and valuable consideration herein acknowledged as received, the undersigned hereby grants to Assemble, legal representatives and assigns, those for whom Assemble is acting, and those acting with Assemble's authority and permission, the full rights to transcribe, reproduce and distribute photographs, video, voice, pronouncements, likeness, name and video of the undersigned and/or the undersigned's student, and copyright same, in advertising, promotional materials, publicity efforts or for any lawful, non-commercial purpose. These materials will not be sold or reproduced for sale in any form.

I hereby waive any right that I may have to inspect or approve the finished product or products and the advertising copy of the other matter that may be used in connection therewith or the use to which it may be applied. I hereby release, discharge and agree to hold harmless the photographer and/or videographer, Assemble, legal representatives and assigns of the foregoing, and those acting with Assemble's authority and permission, from any liability by virtue of any blurring, distortion, alterations, optical illusions, or in use to composite form, whether intentional or otherwise, that may occur or be produced in the taking of said picture, video images and/or audio material or in any subsequent processing thereof, as well as any publication thereof, including without any limitations, any claims for libel or invasion of privacy.

I hereby warrant that I am of full age and have the right to contract my student's name, as I am either the student's parent or his/her legal guardian. I have read the above authorization, release, agreement, prior to its execution, and I am fully familiar with the contents thereof.

This release shall be binding upon me and my heirs, legal representatives and assigns.

\_\_\_\_\_  
*(Parent/Guardian Signature)*

\_\_\_\_\_  
*(Date)*

## **WAIVER AND RELEASE OF LIABILITY**

**NOTICE:** This is a legally binding agreement. You have the right to consult with an attorney prior to signing this permission form. By signing this agreement you relinquish your right to bring court action or recover compensation or obtain any other remedy for any injury to the minor child on whose behalf you are signing this release (hereafter referred to as the “student”), or the student’s property, however caused, arising out of the student’s use of the ASSEMBLE, INC. (“Assemble”) facilities now or anytime in the future.

**ACKNOWLEDGEMENT OF RISK:** I understand that there is risk of injury to the student from the activities involved in the Assemble programs, including, without limitations, crafts, working with live electronic components, soldering, and other such activity. I further understand that the student may also leave Assemble to go on a field trip, which could involve additional risks, such as risk from injury from a vehicle. While particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury, both physical and psychological/emotional or death does exist. I (we) acknowledge that all activities present certain inherent risks and hazards. In addition, I understand that participation in Assemble activities carries other risks incidental thereto, including, but not limited to, the possible reckless conduct of other participants. I (we) also recognize that there are both foreseeable and unforeseeable risks of injury that may occur as a result of my minor child’s participation in the Assemble programs that cannot be specifically listed.

**PARENT OR GUARDIAN RELEASE OF ALL CLAIMS:** The undersigned being the parent(s), guardian, or person having the care and custody of my child listed on page one (1) and authorized by law to sign documents on their behalf, do hereby understand the risks associated with Assemble activities and consent that she/he may participate in such activities, and in consideration of Assemble, its officers, employees, contractors, volunteers, and other agents permitting she/he to participate, do hereby covenant and agree to not sue and agree to hold harmless Assemble activities, including claims based on the negligence of Assemble or its officers, agents, or employees. I understand that I will be solely responsible for any loss or damage the student sustains while using Assemble facilities and equipment. My signature on this agreement signifies I am relieving Assemble of any and all liability for such loss or damage.

This waiver and release of liability shall cover any and all Assemble programs in which your student participates, whether located inside or outside Assemble’s physical space. It shall remain in full force and effect unless and until revoked in writing received by Assemble. This waiver and release shall be governed by the laws of the Commonwealth of Pennsylvania. If any part of it is found to be unlawful, that part shall be severed and the remainder shall remain in full force and effect.

I further certify that my child is in good health and that she/he has no physical limitations, which would preclude the participation in Assemble programs and/or the use of Assemble facilities.

**BY SIGNING THIS DOCUMENT, IT IS MY INTENTION TO EXEMPT AND RELIEVE ASSEMBLE, ITS OFFICERS, AGENTS, OR EMPLOYEES FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE, OR WRONGFUL DEATH CAUSED BY NEGLIGENCE.**

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*(Parent/Guardian Signature)*

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*(Date)*

## **FERPA – RELEASE AND AUTHORIZATION**

The Family Rights and Privacy Act (FERPA) protects you and your child's right to privacy and confidentiality of educational records. You can contact your child's school to receive a detailed notification of these rights. **Pittsburgh Public Schools** provides you with a detailed written notification of these rights annually and you may always access this notice via the Department of Education link here: <http://www.ed.gov/policy/gen/guid/fpco/ferpa/index.html>. FERPA requires prior consent to share personally identifiable information.

As an approved partner with Pittsburgh Public Schools for the 2019-2020 school year, Assemble is authorized to receive personally identifiable student educational data including grades, PSSA and other assessment scores, attendance and discipline data, Promise eligibility, credit count, and graduation rates. No signature is needed.