

# Waiver/Consent Form

*Print, Complete and Bring on the contest day.*

In consideration of my minor (the student) being permitted to participate in the Dining Philosophers Programming Classic, the sufficiency of which I hereby acknowledge, and intending to be legally bound for myself, my heirs, executors and administrators, hereby waive and release, The Trustees of the University of Pennsylvania, The Dining Philosophers, their successors, assigns, trustees, officers, employees, students and agents, from any and all claims or demands for damages or injuries arising out of or in any way connected with my child's participation in this program. I acknowledge that the primary supervision of my child will be the responsibility of his Teachers from his school and not the responsibility of the Dining Philosophers or the University of Pennsylvania.

Student's name \_\_\_\_\_

Signature of  
Parent  
or Guardian \_\_\_\_\_

Date \_\_\_\_\_

Emergency  
Contact  
(Name and Phone) \_\_\_\_\_

I give permission for photos of my child in connection with this program to be used in print or electronic publications.

{ }Yes { } No.