SAN DIEGO UNIFIED SCHOOL DISTRICT JROTC PROGRAM MANAGEMENT OFFICE 6735 GIFFORD Way, Room 101 San Diego, California 92111-6509

PARENTAL CONSENT FORM

STUDENT'S NAME (LAST, FIRST, MIDDLE):		
DATE OF BIRTH (MM/DD/YYYY):	SMALL SCHOOL:	PERIOD #:
NAME OF PARENT(S) OR GUARDIAN(S):		
ADDRESS:		
My (son/daughter) has my permission to enroll in the Diego Unified School District and to participate in all holidays. I understand that JROTC activities will take and from JROTC activities conducted off the school gowned vehicles.	JROTC activities during and after schoo place both on and off school grounds. I u	l hours, to include weekends and understand that transportation to
In consideration of the permission extended to my (soi (I/our) heirs, legal representatives and assigns and renthe State of California, the United States Government, any and all claims, demands, actions or causes of actio participation in any JROTC activity. In addition, I here (son/daughter) treated in the event (he/she) is injured	nise, release, and forever discharge the S all the officers, agents and employees acon, on account of or in any way arising or eby authorize the JROTC person in charge	an Diego Unified School District, eting officially or otherwise, from ut of (my/our son's/daughter's)
I also agree for my child to sign for the articles of unif my child will either be returned to JROTC unit in good upon (his/her) separation from the JROTC program, or	d condition, fair wear and tear excepted,	at the end of the school year, or
SIGNATURE OF CADET:		
SIGNATURE OF PARENT/GUARDIAN:		
PHOTOGRA	PHY/VIDEO/MEDIA RELEASE	
During the school year, JROTC will have events that to on campus to gather photographs and/or video footage or around schools. These photos may be posted on the Your child's participation in these events is valued, and photography may take place. Parents/Guardians who pschool by using this form. Schools will make every effiphotographing and videotaping by a device such as a children district staff.	e. In addition, parents and students may to Internet or otherwise distributed without d parent permission is needed to include prefer that their child not be photographed fort to ensure the wishes of the parent/gu	ake photos of events in classrooms t the permission of the school. him or her in events where d or videotaped must notify their ardian. Please be aware that
Please indicate by checking the box below if your chil photographed or videotaped at any time, check only th school office.		
Please check one of the following: I give my permission to have my student phodistrict website or brochure. I DO NOT want my child photographed or verification.		tos may be used on school or
SIGNATURE OF PARENT/GUARDIAN:		

SAN DIEGO UNIFIED SCHOOL DISTRICT JROTC PROGRAM MANAGEMENT OFFICE REQUEST FOR STUDENT PARTICIPATION SEASONAL ACTIVITY

wis	hes to participate in all JROTC activities including: Team
Sports, Activities and Competitions, Field Trips, Summer Camp dur 13, 2022. Transportation will be by school or chartered bus, military employees or parents.	ing the School Year 2021-202 from August 25, 2021 to June
It is necessary that the parents specifically request that their child be furnished by the school, but parents should understand that supervis. The school will take every precaution to ensure the welfare and safe However, it is important that you understand that the school cannot accident. Low cost student accident insurance is available; also, add participating in interscholastic athletics. Please call or write to the school.	ion will end at the conclusion of the specific activity stated. ty of our (son/daughter) participating in this activity. assume financial or legal liability in case of injury or itional low cost insurance is available for students
If you wish for your (son/daughter) to participate in the above desc participation form below, and return it to the school immediately. A Grading System is provided to assist you in following your (son/dau	copy of the JROTC Course Outline, Expectations, and
	na Diaz-Booz rincipal - Kearny High School
PARENT REQUEST FOR STU	DENT PARTICIPATION
I, the undersigned, request that my (son/daughter) participate in all JROTC activities, including: Classes, Team Sports, during the School Year of 2021-2022.	be permitted to Activities and Competitions, Field Trips and Summer Camp
California law (Education Code 1081.5) provides that any person m school district and the State of California for injury, accident, illness excursion. ACCORDINGLY, (I/WE) HEREBY WAIVE ALL CL SCHOOL DISTRICT OR THE STATE OF CALIFORNIA, thei illness, or death occurring during or by reason of the above described.	o, or death occurring during or by reason of the field trip or AIMS WHICH (I/WE) MIGHT HAVE AGAINST THE r officers, agents, and employees for injury, accident,
SIGNATURE(S) OF PARENT(S) OR GUARDIAN(S):	
DATE:	
STATEMENT OF HEALTH	
To the best of my knowledge,activities.	is in good health and able to participate in all JROTC
SIGNATURE OF PARENT/GUARDIAN:	
DATE	