



Student Application

School: _____ Teacher: _____

*****PLEASE PRINT CLEARLY AND COMPLETE ALL INFORMATION. STUDENTS MAY NOT ATTEND STARBASE UNLESS FORM IS SIGNED*****

Student/Parent Information:

Student Name: _____ Gender: Male ☐ Female ☐ Other ☐

Parent's Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Is any of this student's immediate family (Father, Mother, Brother, Sister, Guardian) military affiliated? Yes ☐ No ☐

Emergency Information:

Emergency Contact Name: _____ Relationship to Student: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

***Please note any medical conditions, concerns, or other special issues of which a chaperone should be aware:**

Student Release of Liability:

This release of liability made by the undersigned, a parent or guardian of a potential participant in the STARBASE Program (hereinafter collectively referred to as "Applicant"), for the purpose of releasing the UT Military Authority, State of UTAH, the United States Department of Defense, the UT STARBASE Academy and any other federal or state governmental entities or corporate sponsors thereof (all collectively referred to hereafter as "Hill Air Force Base Utah") from any and all liabilities in exchange for participation does hereby state:

WHEREAS, the said student desires the use of services, grounds, facilities and/or equipment of the Hill Air Force Base Utah for participation in the STARBASE Program does hereby state that: In consideration of the mutual, advantages, benefits and purpose to be achieved thereby; the use of said grounds, facility or equipment for the purpose and activities described is hereby approved, conditioned upon the applicant releasing the Hill Air Force Base Utah and its agents, servants, employees, soldiers and airmen of and from any and all claims, demands, actions, causes of action whatsoever, arising out of or related to any loss, damage or injury, including death, that may be sustained by any person or property arising out of the described activity or any other activities relating thereto conducted by Applicant or en route to or from these activities. The applicant understands and agrees that there are certain risks attendant to these activities and by signing this agreement expressly authorizes travel to and from the various activities in Hill Air Force Base Utah vehicles. The applicant individually and on behalf of the minor child hereby expressly and voluntarily assumes all risks and hazards of injury to the minor child and his or her property resulting from participation in the program to the full extent allowable under federal and state law. In the event of accident, injury, or other medical emergency, the Hill Air Force Utah is authorized to make emergency medical decisions on behalf of Applicant and to release the Hill Air Force Utah from liability for same. I understand that my liability for property damage and personal injuries caused by my child is the same as I am subject to during normal school hours and activities at my child's school. Applicant understands the above terms and conditions and acknowledges that it has carefully read the above statement and willingly complies with the terms and conditions thereof, understanding that it voluntarily assumes all risks and hazards of injury to applicant resulting from participation in the described activities.



Parent/Guardian Signature:

Parent/Guardian Printed Name:

Date:

Photographic Release: I hereby authorize STARBASE Hill, the Hill Air Force Base Utah and the United States Department of Defense and other federal and state governmental entities and corporations working in conjunction therewith (collectively referred to hereinafter as "STARBASE Hill") to utilize photographs or videos of my child for promotional purposes. I hereby waive any monetary or other rights that I might have to inspect and/or approve the finished product of the advertising, promotional or news copy and consent to its use in whatever way STARBASE Hill deems appropriate. I hereby consent to the release of said photographs to broadcast and print media such as non-governmental newspapers and publications, television, cable or radio stations. I understand that the all rights and title to the released information shall remain with STARBASE Hill or the recipient.



Parent/Guardian Signature:

Parent/Guardian Printed Name:

Date: