

AEROSTAR CONSENT TO PARTICIPATE, ASSUMPTION OF RISK, RELEASE AND HOLD HARMLESS AGREEMENT

Representation and Warranties: In connection with my child's participation in the, I hereby represent and warrant to AeroStar all of the following:

1. I understand that it is my responsibility to provide transportation for my child to and from the Event and that AeroStar has no responsibility of any kind for my child outside of scheduled Event hours.
2. I understand that I must remain at the AeroSTEM Expo during the entire time that my child attends the Event.
3. I understand that, although AeroStar/IIT will attempt to maintain the Event as described herein, AeroStar/IIT reserves the right to change the Event, at any time and for any reason, with or without notice, and that AeroStar/IIT shall not be responsible or liable for any expenses or losses that I may sustain because of these changes.
4. I confirm that the information set forth on the Emergency Contact Information Form, which is attached to and made a part of this Agreement, is true and correct.
5. I understand and agree that AeroStar/IIT will not be liable for any personal property that my child may bring to the Event and that we assume full responsibility to safeguard any such property from loss, theft or damage.
6. I have informed my child, and I agree, that he or she must at all times follow all rules, directions and guidelines regulating the conduct of Event, and my child has assumed responsibility to so conduct himself/herself.
7. Further, I acknowledge and agree that AeroStar/IIT may, at any time, discontinue my child's right to participate in the Event if AeroStar/IIT determines, in its sole discretion, that his or her actions or general behavior is impeding or obstructing the progress of the Event.
8. I understand that IIT's Main Campus is defined as the area between 31st and 35th Streets, Michigan Avenue and Dearborn Street.

Fitness to Participate and Emergency Medical Treatment:

We represent to AeroStar/IIT that I have adequate health insurance or other means to provide for and pay any medical costs that may directly or indirectly result from my participation in this Activity and that we will indemnify and hold AeroStar/IIT harmless for the same. We further represent to AeroStar/IIT that there are no health-related reasons or problems which preclude or restrict my participation in this Activity. As stated in the accompanying Emergency Contract and Medical Information Form below, which, by this reference is made a part of this Consent to Participation and Assumption of Risk and Release, we authorize AeroStar/IIT and any of its officers, agents or employees to secure any emergency medical treatment for me deemed appropriate in the event that I suffer injury or illness while participating in the Program.

Consent to and Use of Photographs and Video:

We understand that throughout my child's participation in the Program, AeroStar/IIT will, from time to time, at its discretion, take photographs/digital images and/or videos of Program participants, including my child (the "Photographs"), and we grant permission for AeroStar/IIT to so take Photographs of my child. We acknowledge and agree that AeroStar/IIT shall be the exclusive owner of any Photographs so taken. Further, we grant perpetual, royalty-free right, permission and license to AeroStar/IIT to make, take, use, copy, reproduce, and distribute, including, without limitation, via its World Wide Website as well as its designated webpage on Facebook and YouTube, in official AeroStar/IIT publications and as part of official AeroStar/IIT publicity materials, any such Photographs of my child during his/her participation in the Program as well as to use his/her name in connection with such Photographs, all without further consideration.

We acknowledge AeroStar/IIT's right to crop or treat any such Photographs of my child at its discretion. We also acknowledge that AeroStar/IIT may choose not to use the Photographs at this time, but may elect do so at its own discretion at a later date. We also acknowledge that AeroStar/IIT reserves the right to discontinue use of Photographs without notice. We understand that once the Photographs are posted the Internet, the Photographs can be downloaded by any computer user on or off campus. We understand that our consent to the foregoing use is voluntary, and on behalf of my child, I accept, and my child assumes the risk associated with, any risk that may come from such use and disclosure of the Photographs. Further, as this consent is being freely given in connection with my child's participation in the Program, we, as and to the full extent allowed by law, shall not attempt to hold AeroStar/IIT or its trustees, officers, employees, agents and volunteers liable for any injury, death, damage or loss to person or property resulting from, sustained by or arising out of these disclosures and hereby release all of the above-named from any such liability.

General Release:

We state that we understand that we are freely agreeing to assume and take on all of the risks and responsibilities in any way associated with my child's participation in the Program. In consideration of and return for AeroStar/IIT providing my child the opportunity to participate in the Program, which we acknowledge will be beneficial to him/her, we, as and to the full extent allowed by law, hereby release AeroStar/IIT and its governing boards, employees and agents from any and all liability, claims and actions, excluding those arising from willful and wanton misconduct, that may arise from any injury or harm to me, from my death or from damage to my property in connection with the Program. We understand that this release covers liability, claims and actions caused entirely or in part by any acts or failure to act of AeroStar/IIT or its governing boards, employees or agents, including, but not limited to, negligence, mistake or failure to supervise, but excludes willful and wanton conduct.

We recognize that this release means that we, as and to the full extent allowed by law, are giving up, among other things, rights to sue AeroStar/IIT, its governing boards, employees and agents for injuries, damages or losses that I may incur. We also understand that this release binds, as and to the full extent allowed by law, our heirs, executors, administrators and assigns. We acknowledge that we have had the chance to seek any third-party advice that we wish, including consulting legal counsel, prior to executing this release. We acknowledge that, we have read this release in its entirety, we fully understand this release, and we agree to be legally bound by its terms.

General Terms:

If any provision or aspect of this agreement is found to be unenforceable, all remaining provisions of this agreement will remain in full force and effect. If any dispute concerning my child's participation in the Program requires the adjudication of a court of law, such adjudication shall occur in the courts of Cook County, Illinois and will be determined by the laws of the State of Illinois, without regard to its conflict of law principles. This agreement represents my and my child's complete understanding with AeroStar/IIT concerning AeroStar/IIT's responsibility and liability for my child's participation in the Program, supersedes any previous or contemporaneous understandings that we may have had with AeroStar/IIT on this subject, whether written or oral, and cannot be changed or amended in any way without the written concurrence of AeroStar/IIT me and my child.

EMERGENCY CONTACT AND MEDICAL INFORMATION FORM

As stated in the Consent to Participation and Assumption of Risk and Release above, we have authorized AeroStar/IIT and any officer, employee or agent of AeroStar/IIT to secure any emergency medical treatment deemed appropriate for me in the event that I suffer injury or illness while participating in the Program. In furtherance of this request and authorization, we provide the following information, which we represent is accurate and may be relied upon by any of the foregoing parties seeking to secure me medical assistance:

EMERGENCY CONTACT INFORMATION:

My Child's Name:	
Name of Emergency Contact:	
Relationship of Emergency Contact:	
Phone Number of Emergency Contact:	
HEALTH INSURANCE:	
Name of Health Insurance Company:	

I, _____, am the parent or legal guardian of _____.
 I acknowledge that I will participate in the AeroStar Aviation and Illinois Institute of Technology ("AeroStar/IIT") **AeroSTEM Youth Aviation Expo** to be held on the IIT Main Campus (as defined below) on **Saturday March 24th**, 2018, from the hours of **9 AM** until **1 PM**. I hereby agree and consent to my child's participation in the AeroSTEM Youth Aviation Expo 2018 Event ("Event"), which is an event designed to provide STEM activities for children between the ages of 12 & up on the IIT Main Campus (as defined below) during the date and time (referenced above) that I will be attending the AeroSTEM Expo.

WE HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. WE ARE AWARE THAT THIS IS A RELEASE OF LIABILITY FOR ME AND MY CHILD AND A CONTRACT AMONG ME, MY CHILD AND AEROSTAR/ILLINOIS INSTITUTE OF TECHNOLOGY. WE HEREBY SIGN THIS AGREEMENT OF OUR OWN FREE WILL, ACKNOWLEDGING THAT, PRIOR TO DOING SO, WE HAD THE RIGHT TO CONSULT WITH AN ADVISOR, COUNSELOR OR ATTORNEY OF OUR CHOOSING.

We freely and knowingly authorize AeroStar/IIT to use and disclose any of the information provided herein, including, but not limited to medical information, in whatever manner AeroStar/IIT deems appropriate to render assistance to my child in the Program of medical emergency. We have read this statement; we fully understand it; and we agree to be legally bound by it.

Parent/Legal Guardian's Name (Please Print)	Participant's Name (Please Print)
Parent or Legal Guardian's Signature	Participant's Signature
Date	Date