



Resident Minor Consent to Leave Campus with Temporary Guardian
(Guardian Must Be Age 24 or Older Regardless of Relationship)

Submit this request by EMAIL (summerdance@pointpark.edu) **24 hours** in Advance and before **4 pm Monday through Friday** for each specific request. No request can be processed during a weekend since the office will be closed. A Resident Parent will call you to confirm all requests.

Name of Minor: _____ Age _____ Birth date _____

Temporary Guardian Information: (As appearing on a valid driver’s license or other appropriate form of identification)

Name of Temporary Guardian: _____ Relationship to Participant: _____

Address _____ City _____ State _____ Zip _____

Pick up: Guardian must be at least 24 years of age and show a valid driver’s license to resident chaperone or desk attendant before leaving with student.

I am the parent/legal guardian identified on this form. I consent for participant/Minor named above to leave with a Temporary Guardian named above.

Pick-Up Day: _____ Date: _____

Estimated Pick-up time _____ Estimate Return Time _____

While in the custody of Temporary Guardian, Participant will be physically located at the following address (if more than one address, indicated dates and time for each address:

My phone # is: _____ I am available to speak on the following dates and times:

I ASSUME AND ACCEPT ALL RISKS arising out of, associated with, or related to Minor being released by the University to the above-identified Temporary Guardian, or an individual purporting to be the above-identified Temporary Guardian, even though such risks may be or may have been caused by the negligence of the University.

I REMISE, RELEASE AND FOREVER DISCHARGE the University its principals, directors, officers, agents, employees, members and volunteers, from all liability, actions, causes of action, suits, judgments, claims and demands and waive any claim for damage arising from Minor being released by the University to the above-identified Temporary Guardian, or an individual purporting to be the above-identified Temporary Guardian even though such liability, actions, causes of action, suits, judgments, claims and demands that may have been caused by the negligence of the University and/or its principals, directors, officers, agents employees and volunteers.

I certify that I am the parent or legal guardian of the Participant and that I am of lawful age (18 years or older) and otherwise legally competent to sign this agreement. I certify that I have carefully read and both fully understand this Assumption of Risk/Release of Liability Form, and agree to its terms in all respects. I understand that the terms of this agreement are legally binding.

Relationship to Minor

Minor’s Name, Printed Clearly

Signature of Parent/Guardian

Parent/Guardian’s Name, Printed Clearly & Date