

MHCC ID#: _____

Underage Release & Liability Agreement

NAME: _____ DATE OF BIRTH: ____/____/____

ADDRESS: _____ CITY: _____ STATE: ____ ZIP: _____

The above named student has permission to take courses at Mt. Hood Community College (MHCC) for the _____ academic year. We understand that MHCC provides an adult, independent, collegiate learning environment primarily tailored to meet the needs of post-secondary adult students. We further understand that admission to MHCC carries with it the presumption that the student will conduct him/herself as a responsible member of the MHCC community. **SUMMER TERM ONLY:** Only the Release Agreement for Potential Injury or Liability will be required to be completed prior to underage student registration.

Signature of High School Principal, Counselor or Designee: _____

Name of High School: _____

Signature of Student: _____ Date: ____/____/____

All concurrently enrolled high school students must be 16 years of age. In most cases the College Placement Test will be required **prior** to initial registration. New students age 15 and under must also meet with the High School Services Director (503-491-7421) prior to registration. Note: If you wish a copy of your MHCC transcript to be sent to your high school at the end of the quarter, you must complete a TRANSCRIPT REQUEST form in the MHCC Admissions, Registration and Records Office or online at <http://www.mhcc.edu/transcripts/>

RELEASE AGREEMENT FOR POTENTIAL INJURY OR LIABILITY

I approve of my child attending Mt. Hood Community College. The above understands they will participate in activities sponsored by or offered through the college. The undersigned also understands that all activities have risks, both to participants and to property. It is understood activities will be led by individuals who may or may not have professional training. The undersigned also agrees and accepts that Mt. Hood Community College, its board of directors, officers, employees, volunteers, and agents assume no responsibility or liability in connection with any activities or the transportation to or from such activities. The undersigned also agrees that the college will not be responsible for or liable for any act, error, omission, or for any personal injury, whether negligent or not. The College reserves the right to withdraw any or all announced parts of any activities should conditions warrant and also to decline to accept or retain participants as members of any activity.

I understand that if I choose to drive my personal vehicle instead of riding with the transportation Mt. Hood Community College is providing for this event, I accept all responsibilities for any wear and tear on my vehicle as a result of this use (i.e. maintenance to include engine damage, body damage, damage to tires, or any other related damage). I also understand that if there is an accident and passengers in my vehicle are injured and I am negligent, the liability for their bodily injury is my responsibility. Mt. Hood Community College is not responsible for traffic citations, towing, or parking tickets, which may result from the use of my personal vehicle for this event.

I have read the above and agree to accept any risks, which may be associated with college classes or activities. I also authorize the teacher, program leader or qualified medical personnel to take whatever first-aid action is deemed necessary, in their sole judgment, to protect my health and safety in the event of any emergency.

PARENT/GUARDIAN SIGNATURE REQUIRED

Print Parent or Legal Guardian Name: _____

Signature of Parent or Legal Guardian: _____

Phone: _____

Date signed: ____/____/____

IN CASE OF EMERGENCY, NOTIFY:

Name: _____

Relationship: _____

Phone: _____

Phone: 503-491-7421 Fax: 503-491-7390
Mailing Address: Mt. Hood Community College, High School Services AC 1162
26000 SE Stark St. Gresham, Oregon 97030