



2020 Merit Badge University

TRANSPORTATION PERMISSION AND RELEASE FORM

I understand that Merit Badge University transports participants (hereinafter referred to as “the activity”) to VCA Animal Hospital, 3207 Cookeville Hwy., Livingston, TN., for the MBU Veterinary Medicine class, or to Dairy Queen, 38 W. Spring St., Cookeville, TN, for the MBU Entrepreneurship class.

I, the undersigned, as the parent or guardian of _____, do hereby give permission for my child to participate in the activity and to be transported to the class site(s). I have been given an opportunity to discuss the activity with Tennessee Technological University. I fully understand the nature of the activity and the risk of injury or loss of property associated with the activity.

By signing this form, I am releasing Tennessee Technological University and its employees from claims made by the child or on behalf of the child should injury or loss of property occur as a result of his/her participation in the activity, except when either Tennessee Technological University or its employees are found negligent in the performance or responsibilities associated with the activity.

I acknowledge that I have read this Permission and Release form and fully understand its contents and the consequences of signing this form.

Student’s Name: _____ Event: **2020 Merit Badge University**

Address: _____

Phone: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

If you have any concerns or questions, please contact MBU@tntech.edu.