

Release of Liability and Medical Release for Students by Parent or Legal Guardian

| I, (PRINT name | of parent or legal guardian) as the parent or legal guardian of |
|---|---|
| (PRINT student's name) hereby authorize Bellevue College, its officers, | |
| employees, and agents, full authority and permission to take whatever action they feel is reasonably warranted under the | |
| circumstances. I agree that in the event of a medical emergency, Bellevue College may refer the above-named minor to a | |
| licensed medical practitioner and/or clinic and hereby consent that such physician, hospital, or clinic may treat the above- | |
| named minor in response to the medical emergency. I also hereby authorize that a photocopy of this authorization be | |
| accepted with the same authority as this original. This authority and permission includes, but is not necessarily limited to, | |
| the following: rendering or ordering medical treatment, the giving of medication, and any examinations, X-rays, anesthetic, | |
| medical, or surgical diagnosis or treatment or hospital care if and as deemed necessary. The undersigned understand that | |
| a reasonable attempt will be made to contact the undersigned parent/guardian before any action is taken. The | |
| undersigned agrees to be financially responsible for all medical attention so authorized or ordered during the student's | |
| attendance at Bellevue College. | |
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| My signature below represents that the above-named student has no medical restriction that limits their full participation in | |
| the programs and activities of the college, except as disclosed in any writing attached to this document. | |
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| To the fullest extent permitted by law, the undersigned hereby releases Bellevue College, its officers, employees, and | |
| agents from all liability, actions, debts, claims, demands of every kind and nature which may arise from the student's | |
| attendance, and further waive and release all claims related to, or arising from, such decisions or actions as may be taken | |
| under the authority of this document. | |
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| This release and waiver remain in effect while the student is enrolled at Bellevue College or until it is revoked in writing by | |
| the undersigned, except in the case of minors in which this release and waiver will remain in effect until the student | |
| reaches their 18 th birthday or sooner if revoked in writing by the undersigned. | |
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| Student's Signature | Date |
| | |
| Parent or Legal Guardian's Signature | Date |
| | |
| Contact Telephone Number for Emergencies (include area | |
| code) | |
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Routing Instructions

1) Administrative Services