

## Permission and Release

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### 2024 SUNY Oneonta Migrant Leadership Academy

I, the parent or guardian of \_\_\_\_\_, give permission for my child/dependent to attend and participate in the 2024 SUNY Oneonta Migrant Leadership Academy (SOMLA) at SUNY Oneonta, including permission to go on supervised field trips sponsored by SOMLA. I give permission for my child to ride in a car or school van driven by a member of the migrant program staff or chartered bus driven by hired, professional drivers. I further give permission for my child to reside on the SUNY Oneonta campus in a Residential Hall during the SOMLA Program from July 9<sup>th</sup> to July 16<sup>th</sup>, 2024.

I agree that I will be responsible for any costs of any property damage incurred by my child at any time during the program.

I understand that my child must attend every required class session (unless ill) and is bound by the rules and regulations in place at SUNY Oneonta as well as the rules established by the SOMLA Program. I understand that if my child fails to comply with the rules, he/she will be expelled from the program.

I hereby release SUNY Oneonta and SOMLA Program, their agents and employees, from all actions, damages or claims which I, my heirs, executors, administrators, or assigns may have against SUNY Oneonta or the SOMLA Program for all personal injuries, known or unknown, which my child has or may incur by participating in the program and the activities and field trips described above.

I have read this release and understand all of its terms. I execute it voluntarily and with full knowledge of its significance.

Intending to be legally bound hereby, I execute this release:

\_\_\_\_\_  
Name of Parent/Guardian (Print)

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

Address: \_\_\_\_\_

Telephone Day: \_\_\_\_\_ Evening: \_\_\_\_\_