

**2025 Alabama Rural Electric Youth Tour –
Consent for Medical Treatment, Liability, and Publicity Release Form**

In consideration of the named youth's selection and participation in any of the Youth Tours' activities and other consideration, I/We the undersigned parent(s) or guardian(s) of _____ hereby give my/our consent for him/her to

(youth's full name)

participate in the **Alabama Rural Electric Montgomery Youth Tour** ("Montgomery Tour") from **March 11-13, 2025** and if chosen, the **Alabama Rural Electric Washington Youth Tour**, ("Washington Tour"; together with Montgomery Tour, collectively, "Youth Tours"), from **June 16-22, 2025** sponsored by the co-op and the Alabama Rural Electric Association of Cooperatives (herein "AREA"). I/We, the undersigned, understand that this participation involves travel within Alabama and, if selected, travel from Alabama to Washington, D.C., and that at times my/our son/daughter/ward may be traveling and/or participating in activities without the direct supervision of a chaperone, which we hereby consent to and authorize.

I/We authorize and direct the co-op and AREA, through their staffs and volunteer chaperones, to direct and supervise my/our son/daughter/ward. I/We further request, authorize and consent, for and on behalf of the child/ward to the co-op and AREA, through their staffs and volunteer chaperones, securing any medical or other emergency services the said staffs and volunteer chaperones in their reasonable discretion may deem necessary or desirable for my/our son/daughter/ward during his/her participation in the Youth Tours.

I/We hereby forever release and discharge and hereby agree to hold harmless the co-op and AREA, their officers, directors, trustees, members, staffs, and associated organizations together with their heirs, successors, or assigns, from and against all actions, causes of action, claims, damages, costs, liabilities, expenses, compensation, personal injury, property loss, or any other loss or injury received or incurred by my/our son/daughter during his/her participation in the Youth Tours.

The undersigned do hereby acknowledge the uncertainty surrounding the continued COVID-19 pandemic and its potential effects on individuals and that its potential effects on individuals vary, both on a short term and long-term basis, and are aware of the published CDC guidance. In that regard, the undersigned do hereby forever release, waive and discharge the co-op and AREA, and their respective officers, directors, members, employees and volunteers from and against any and all liability, losses, compensation, damages, actions, causes of action, claims, expenses (including medical expenses) and costs suffered or incurred by or on behalf of the above-named child or ward arising from or related to such child or ward contracting or becoming infected or ill with coronavirus or COVID-19 from attending or while attending any Youth Tour activity including, but not limited to, any related travel, activities, lodging activities, dining activities or otherwise.

I/we, the undersigned, for and on behalf of the above-described youth, hereby grant permission and consent to the co-op and AREA to use photographs, likenesses, and/or videotape images of my/our son/daughter/ward in newspapers, magazines, newsletters, videotapes, radio/television broadcasts, and/or Internet web sites (along with his/her name) for publicity purposes related to the Youth Tour activities.

This consent is binding upon the youth and undersigned parent(s) and is governed by Alabama law.

Signed at _____, Alabama, this _____

(city)

(day)

day of _____, 202_.

(month)

Parent/guardian's signature

Parent/guardian's signature

Date

Date



State of Alabama, County of _____

Sworn to and subscribed before me, a Notary Public, this _____ day of _____, 202_.

My commission expires: _____.

(Seal – if available)

(Signature -- Notary Public - State of Alabama)