



## CERTIFICATE OF UNDERSTANDING AND RELEASE OF LIABILITY

1. I permit my child to participate in all HJCP activities which may include various off-campus activities and field trips, including transportation to and from such events, classes, and any event not on HJCP property.
2. I authorize the HJCP to conduct whatever background search is deemed appropriate. I fully understand that the information collected may be of a sensitive, confidential, and privileged nature, and may reflect upon my selection, participation, and/or dismissal.
3. That my youth will be residing at HJCP in Hilo, Hawaii. I also understand that Hawaii Community College, and/or other organizations will administer the education component and I authorize them to share all information relating to the education program of my youth.
4. That HJCP has my permission to release photographs/biographies of my youth to the media, for marketing materials, and non-confidential information of my youth to the same publicity purposes. I also understand that this information may be released by HJCP to any source without further consent, to include members of the government, news, radio, and print media or in use in HJCP's informational/marketing materials.
5. The program has been explained to me and I understand what they will attempt to do.
6. I give my permission for HJCP staff to maintain discipline in the program and understand that after an incident of noncompliance with MHCP standards, associate(s) may be dismissed from the Job ChalleNge Program, depending on the infraction.
7. I also understand that during the program, my son/daughter may be randomly tested for drugs and alcohol. I also understand that a positive test result for drugs or alcohol will subject my youth to immediate dismissal from the program.
8. FURTHERMORE, in consideration of my youth's participation in HJCP, I HEREBY RELEASE the State of Hawaii, the Department of Defense, the officers, agents, employees, successors, and assigns from any and all liability which may arise from my youth's application, selection, participation or dismissal from HJCP and I AGREE to indemnify and hold harmless the State of Hawaii, the Hawaii National Guard, and the Hawaii Job ChalleNge Program, the Department of Defense, the officers, agents, employees, successors, and assigns regarding any liability or cause of action which may arise from my youth's participation in HJCP.

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Associate Printed Name	Associate Signature	Date
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Parent/Guardian Printed Name		
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Parent/Guardian Signature		Date