



RULES, AGREEMENT AND RELEASE FOR MINORS

Pierce College

Required for all students under age 18

This document has legal significance. Please Read Carefully.

The undersigned Pierce College student and the student's natural parent(s) and/or legal guardian, agree to the following rules:

1. Students must obey the local, state and federal laws. Drinking alcohol is prohibited until age 21. Smoking is prohibited until age 18. Illegal drugs are prohibited for persons of any age, and students should not be associated with anyone involved with illegal drugs in any way.
2. Students must always let their host family know about their plans ahead of time and call if their plans change.
3. Students must obey the house rules and respect the property of the host family.
4. Students and natural parents must respect decisions made by Pierce College officials.
5. Students must pay all fees to the family on time.

In addition to the foregoing, the undersigned student and the student's natural parent(s) and/or legal guardian(s) acknowledge(s) certain facts and release(s) Pierce College and the student's host family, as follows:

1. Student's Personal Property. The student's personal property is not the responsibility of Pierce College or the host family. Any lost or stolen personal property of the student, including lost or stolen money, which is not covered by an insurance policy, is the responsibility of the student and the student's natural parent(s) and/or guardian(s). Students are required to establish a bank account separate from that of their host family.

2. Insurance. Any medical expenses or lost/stolen property or damage not covered by applicable insurance of the student is the responsibility of the natural parent(s) and/or legal guardian(s) of the student.

a. **Medical Insurance.** Neither Pierce College nor the host family is responsible for any medical expenses incurred by the student. The student must obtain LewerMark medical insurance coverage for the term of his/her stay. Please note: Medical insurance policies exclude coverage for "pre-existing conditions" (that is a medical condition that exists prior to the commencement of the insurance policy). Additionally, LewerMark policies do not cover dental or vision.

b. **Property and Liability Insurance.** Neither PIERCE COLLEGE nor the host family is responsible for any property damaged or destroyed by the student or for any liability that results from the student's activities while enrolled at PIERCE COLLEGE. The natural parent(s) and/or legal guardian(s) of the student is (are) responsible for any damage or destruction of property or any injury to persons inflicted or caused by the student while living with the host family and/or enrolled at PIERCE COLLEGE.

Signature of Student: _____

Date: _____
Month /Day / Year

Parent/Guardian
Signature _____

Date _____



In addition to the foregoing, the natural parent(s) and/or legal guardian(s) agree to the following:
PERMISSION FOR MEDICAL CARE and RELEASE:

I (we), as the applicant's natural parent(s) and/or legal guardian(s), agree to authorize PIERCE COLLEGE or the Host Family to act for us in any emergency, accident, or illness.

I (we), as the applicant's natural parent(s) and/or legal guardian(s), agree to fully indemnify and hold harmless both PIERCE COLLEGE and our child's American Host Family from any and all liabilities, including liabilities to third parties, which may arise from the student's participation in any activity.

Natural Father/Legal Guardian:

Natural Father/Legal Guardian

Address (Street Address / City / State / Postal Code / Country)

Phone E-mail

Signature of Natural Father/Legal Guardian Date (Month / Day / Year)

Natural Mother/Legal Guardian:

Natural Mother/Legal Guardian

Address (Street Address / City / State / Postal Code / Country)

Phone E-mail

Signature of Natural Mother/Legal Guardian Date (Month / Day / Year)

Signature of **Student:** _____ Date: _____
Month /Day / Year



PIERCE COLLEGE LIABILITY RELEASE

Students who will be under age 18 when classes begin, please submit this form, signed and dated, with the Admissions Application.

Student's Name: _____

Last Name, First Name

Consent to Medical Care and Treatment of Minor Children

Hospitals and physicians may be unable to treat or care for patients under age 18 without consent from parents or legal guardians. This can cause problems if a minor has a medical emergency and parents/guardians are not readily available to consent to treatment.

Copies of this form will be made available to the International Education Office staff at Pierce College.

I, _____, the natural parent/legal guardian of _____, authorize and consent to medical, surgical and hospital care, treatment and procedures to be performed for my child by a licensed physician or hospital personnel when, at the sole discretion of the attending physician, such care, treatment and procedures are immediately necessary or advisable in the interest of my child's health and well-being, and it is not advisable to take the time to contact me in advance.

Under the circumstances set forth above, I agree not to be informed in advance of the nature and character of the proposed treatment, its anticipated results, possible alternatives, and the risks, complications, and anticipated benefits involved in the proposed treatment and the alternative forms of the treatment, including non-treatment.

Signature of Parent/Guardian

Date

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Signature of Parent/Guardian

Date



PERMISSION FOR MINOR CHILD TO PARTICIPATE IN ACTIVITIES AND SIGN WAIVERS ON HIS/HER BEHALF:

I (we), as the applicant's natural parent(s) and/or legal guardian(s), agree to authorize our minor child _____ to participate in various Pierce College activities. We understand that participation in these activities requires our signature on an Assumption of Risk & Release of Liability Waiver form. In lieu of our parental signature, we authorize our minor child to sign this Assumption of Risk & Release of Liability Waiver form in order to participate in the following activities we have marked below:

- IEP field trips
- IEP Service Learning projects
- On-Campus Events
- Intramural Sports
- Community Events
- Dances
- Outdoor Activities
- Overnight Activities
- Festivals, Fairs, and Celebrations
- Visits to other Colleges and Universities
- Student-Organized Events and Activities
- College-Sanctioned Events and Activities

I (we), as the applicant's natural parent(s) and/or legal guardian(s), agree voluntarily and without reservation to indemnify and hold harmless Pierce College and its officers, employees, and agents from any and all liability, loss, damages, costs, or expenses (including attorney's fees) which do not arise out of the negligent act or omission of an officer, employee, and/or agent of the institution while acting within the scope of their employment or agency, as a result of my child's participation in the program, including any physical injury or loss thereto.

Natural Father/Legal Guardian:

Natural Father/Legal Guardian

Address (Street Address / City / State / Postal Code / Country)

Phone E-mail

Signature of Natural Father/Legal Guardian Date

(Month / Day / Year)

Natural Mother/Legal Guardian:

Natural Mother/Legal Guardian

Address (Street Address / City / State / Postal Code / Country)

Phone E-mail

Signature of Natural Mother/Legal Guardian

Date (Month / Day / Year)

Signature of **Student:** _____ Date: _____



**STUDENT CONSENT FORM TO RELEASE INFORMATION
Family Educational Rights and Privacy Act (FERPA) of 1974**

In accordance with the Family Educational Rights and Privacy Act (FERPA) of 1974, Pierce College must obtain written consent from a student before releasing the educational records of that student to a third party. Such written consent must be signed and dated by the student, specify the records to be released, state the purpose of the release, and identify the party or class of parties to who release may be made.

I _____, hereby give my written consent
(Student's Name-Print)

to Pierce College International Education Staff to release information about my academic progress, and any behavioral or health issues to _____
(Identify the person(s) to whom release may be made)

for the purpose of assistance with any challenges or issues that I am having.

In addition, I _____, hereby give my written
(Student's Name-Print)

consent to Pierce College International Education Staff to release my name, Date of Birth, address, Student ID number, and Gender to Lewermark Insurance for the purpose of insurance coverage.

I understand that my written consent will remain in effect until I notify the Pierce College employee/office named in this form, in writing, to cancel it.

I understand that the specific information referenced on this form is being released to a third party at my request with the understanding that s/he will not release it to any other parties. Pierce College is hereby released from all legal responsibility or liability for the release of the above-mentioned information.

Student's Signature: _____ Date: _____

Pierce College is required to keep the original signed consent form. Students are advised to keep a copy of this consent form with their records.



HOMESTAY RULES AND AGREEMENT CONTRACT FOR MINORS

Required for all students under age 18 to be accepted into the Homestay Program
This document has legal significance. Please Read Carefully.

The Pierce College (PIERCE COLLEGE) student and host family agree to the following rules:

1. Students must obey the local, state and federal laws. Drinking alcohol is prohibited until age 21. Smoking is prohibited until age 18. Illegal drugs are prohibited for persons of any age, and students should not be associated with anyone involved with illegal drugs in any way.
2. At all times, the host family must know where the student is, with whom, and when the student will return.
3. Students must obey the house rules, and respect the property of the host family.
4. Students and natural parents must respect decisions made by PIERCE COLLEGE officials.

Due to the fact you are a minor in this country there are laws that have been put into place for your safety and protection. Students under the age of 18 years who are living in a Homestay must comply with the rules that are set in place by this contract. Those who choose to disobey the rules may be removed from the Homestay Program.

1. Be sure that you have asked and received permission from your host if you are staying out late or overnight with a friend.
3. Before you plan an overnight, you must provide your host with your friends contact information. This includes the address, a phone number and the name of their host, if they are also living in a Homestay.
4. Let the host know who you are with and where you are at all times.
6. If the host calls you, you **must** answer the call or return the call as soon as possible.

There are no exceptions to these rules! By signing this contract you are agreeing to the terms listed above and are aware that by breaking this contract you will be removed from the Homestay program and your parents will be contacted.

If you do not agree to these terms, then a different living situation should be considered.

Student
Signature _____ Date _____

Parent/Guardian
Signature _____ Date _____

Host
Signature _____ Date _____