



Student Permission Form & Media Release

Parent/Guardian Permission

I give permission for my child, _____, to attend the Escape the Haze Youth Vaping Prevention Conference on Wednesday, November 13, 2024, at Tri-County Technical College, Easley Campus sponsored by Pickens County Youth Board, FIRE Squad Youth Coalition, and Smokefree SC.

I understand that transportation to and from the event may be arranged by school or sponsoring organizations, and that staff/chaperones will supervise participants during the event.

Emergency Contact Information

Parent/Guardian Name: _____

Phone Number: _____

Alternate Contact Name & Phone: _____

Dietary or Medical Needs: _____

Media Release

(Please check one)

I grant permission for photos/videos of my child to be taken during the event and used in program promotions, publications, and social media.

I do not grant permission for photos/videos of my child to be used.

Parent/Guardian Signature: _____

Date: _____

