

Lockheed Martin Exploring Program

PERMISSION SLIP

I hereby give permission for my son/daughter, _____, to attend the **National Botball Robotics Conference** from **July 1 to July 5, 2009** in **Leesburg, Virginia**. In consideration for the supervision and care provided to my son/daughter, I agree to accept the risk of this trip and agree not to sue Lockheed Martin, the Exploring Program or its employees, agents or volunteers.

I assume responsibility for transportation, housing and food costs associated with the trip. Some funds will be provided by the Exploring Program, based on grants, fund raising, and the number of individuals participating. We will use the Exploring Program funds to pay for conference registration.

Furthermore, I hereby give permission to any volunteer, agent or employee of the Exploring Program to admit my son/daughter to any hospital/medical clinic/medical office for medical treatment in the event of an accident and/or illness. I have included a list below of all medical conditions, allergies, current medications and all other medical information that may be necessary for the treatment of my son/daughter, as well as insurance information.

Parent/Guardian Date

Insurance Company _____

Group Policy No. _____

Medical Conditions _____

Current Medications _____

Allergies _____

Additional Information

