

**HIGHLAND BLUFF ELEMENTARY PARENT-TEACHER ORGANIZATION (HBE PTO)
PARENT/GUARDIAN INFORMED CONSENT
FOR HBE PTO EVENT PARTICIPATION**

RETURN BY THURSDAY, MARCH 5

Student Name: _____

Teacher: _____

GENERAL INFORMATION

The Highland Bluff Elementary Parent-Teacher Organization (HBE PTO) is planning the following event: **HBE PTO Spring Fever Color Run**. The purpose of the event is **to raise funds for the HBE PTO and to allow students the opportunity to participate in the color run.**

Location: **Highland Bluff Elementary School**
5970 Hwy. 25
Brandon, MS 39047

Phone: **601-992-5168**
Website: **www.hbepto.org**

Date: **Friday, March 20, 2020**

Time: **8:00 am – 12:00 pm**

Parent volunteers, teachers, and staff will be available to serve as chaperones.

MEDICAL INFORMATION

The following special health problems should be noted and adequate precautions taken (list such items as unusually severe reaction to bee stings, other severe allergies, hemophilia, diabetes, heart disease, etc.):

The following medications, prescriptions, or special diets are needed:

MEDICAL RELEASE

In the event of an accident or illness, I understand that reasonable effort will be made to contact the parent/guardian immediately. However, if I am not available, I authorize HBE PTO to secure emergency medical care as needed (whether directly or through Highland Bluff Elementary School).

Does your child have medical insurance coverage? Yes No

(It is recommended that all students have medical or student accident insurance.) Please contact the school office for details regarding student accident insurance.

Name of Preferred Doctor: _____

Phone: _____

SEE REVERSE →

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CONSENT

Event specific information: Color Blaze Color Powder will be used as part of this event. Per the company's retail site (www.wholesalecolorpowder.com), colors are made with high quality cornstarch and food dyes. All materials are 100% FD&C and/or D&C grade and approved by the US FDA. However, the product is not designed for consumption. Although all the materials are food grade Color Blaze does not recommend inhaling large quantities of color powder. Anyone who has asthma, is allergic to any of the ingredients, or has respiratory issues should exercise caution when participating in color powder events. Color powder washes out of MOST clothing, so please use discretion regarding the clothing your child wears on the day of the run.

If you have questions or concerns about this activity, please contact **Amanda Roberson, HBE PTO President.**

Although I understand that HBE PTO will make a reasonable effort to provide a safe environment, I am fully aware of the special dangers and risks inherent in participating in the activity, including physical injury and/or death. Being fully aware of the risks, I hereby give consent for

_____ (student) to participate in the activity.

Parent/Guardian Name: _____ Phone: _____

Emergency Contact: _____ Phone: _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian signature reflects their knowledge and approval of the activity described above. This form must be returned to school before the student is involved in the activity.

Please include this student's shirt size here in the event that he/she meets the fundraising goals for the t-shirt prize:

Youth S Youth M Youth L Adult S Adult M Adult L Adult XL Adult 2XL