



I authorize that my transcript and any other pertinent materials may be submitted to the Casper Area Chamber of Commerce for verification of my eligibility to participate in the Casper Area Chamber of Commerce Junior Leadership Program Summer Camp.

My parent(s) or guardian and I hereby release from all liability and responsibility Casper Area Chamber of Commerce, Junior Leadership Casper Program Committee Members and Instructor as well as the Board of Directors of the Casper Area Chamber of Commerce and hold each of them harmless from any damage or injury which may be incurred or caused by me during the Casper Area Chamber of Commerce Junior Leadership Summer Program, including travel. We further consent to the release of information about or relative to my participation in program activities, including scores, photographs, sound and video recordings and any other data. The Casper Area Chamber of Commerce shall have full rights to reproduction and use of all such materials. Following the 2017 Junior Leadership Casper Summer Program the Casper Area Chamber of Commerce has my permission to contact me regarding my participation in the Junior Leadership Casper Summer Program (survey, alumni participation, etc.).

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Student's Signature

Signature Date \_\_\_\_\_

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Parent's/Guardian's Signature

Signature Date \_\_\_\_\_

School Administrator's Title & Signature \_\_\_\_\_

Signature Date \_\_\_\_\_

This form must be presented to Casper Area Chamber of Commerce prior to the deadline of **12:00 p.m. (noon) on Friday, June 9, 2017.**

**Please contact Gilda Lara, Executive Director, Casper Area Chamber of Commerce 307-234-5311 or [glara@casperwyoming.org](mailto:glara@casperwyoming.org) with any questions.**