



**ROCKY MOUNTAIN DIVISION
OF THE
INTERNATIONAL ASSOCIATION FOR IDENTIFICATION**

Minor Student Membership Applicant Parental Consent Form

Minor Student Applicant Information:

Full Name: _____

Date of Birth: _____

Address: _____

City/State/Zip: _____

Phone Number: _____

Email: _____

Parent/Guardian Information:

Full Name: _____

Relationship to Applicant: _____

Phone Number: _____

Email: _____

Emergency Contact Information:

Full Name: _____

Phone Number: _____

Relationship to Applicant: _____

Consent and Acknowledgment:

I, the undersigned parent/guardian, hereby grant permission for my child, _____, to become a member of the Rocky Mountain Division of the International Association for Identification (RMD-IAI) and participate in its activities and events. I understand that these activities may include, but are not limited to, conferences, workshops, professional training sessions, and simulated field investigations.

Release of Liability:

I acknowledge that there are inherent risks involved in these activities, including but not limited to what some may consider disturbing images and narratives of actual crime scenes, exposure to simulated or actual crime scenes, and physical and mental hazards associated with forensic investigations. I understand that all reasonable precautions will be taken to ensure the safety of the participants.

I hereby release and hold harmless the Rocky Mountain Division of the International Association for Identification (RMD-IAI), its officers, members, instructors, and any affiliated organizations from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury that may be sustained by my child, whether caused by negligence or otherwise, while participating in or traveling to and from any activity associated with the organization.

Confidentiality Agreement:

I understand that my child may have access to sensitive information and materials as part of their membership. I agree to ensure that my child will adhere to all confidentiality agreements and will not disclose any confidential information to unauthorized persons.

Photography/Video Release:

I give permission for my child's photograph/video to be taken during professional activities and used for promotional purposes, including but not limited to social media, newsletters, and the organization's website. Please initial next to your release or declination.

I hereby agree to permit the use of my child's image for promotional purposes. _____

I refuse permission for the use of my child's image for promotional purposes. _____

Parent/Guardian Signature:

I have read and understand the above information, and I voluntarily give my consent for my child to become a student member of the Rocky Mountain Division of the International Association for Identification (RMD-IAI) and participate in its activities.

Parent/Guardian Signature: _____

Parent/Guardian Printed Name: _____

Date: _____

Applicant's Agreement:

While participating in the activities of the Rocky Mountain Division of the International Association for Identification (RMD-IAI) I agree to follow all rules, instructions and confidentiality requirements issued by the Officers or Board Members of the Division as well as those of workshop instructors, and to conduct myself in a professional, safe, and respectful manner at all times during the organization's activities.

Applicant's Signature: _____

Applicant's Printed Name: _____

Date: _____