



NATIONAL
FFA ORGANIZATION

National FFA Liability Waiver Instructions

Created: 5/2017

National FFA requires participants in some competitive events to complete a waiver of liability. CDE, LDE and Agriscience Fair participants will submit waivers electronically.

TO ACCESS YOUR WAIVER:

1. Visit www.FFA.org and log in.
2. In the tool bar, under "My Account" select "My Toolbox – Instructor"
3. In the "Application Hub" select "Declarations/Certifications"

Application Hub



4. Select the program where participation is taking place.

2017

2017 National FFA CDEs/LDEs
2017 National FFA Agriscience Fair
2017 State CDE Plaque Request
2017 Star/Proficiency Certification & Check Request
2017 American Degree Declaration (Certification)
2017 National Chapter Award

5. Select "Certification"

Declared Teams		
Event Name	Declaration	Documents
Animal Systems: Div 1		Certification


- Select "Waiver PDFs" for traditional waiver submission, or select "Electronic Waivers" for the preferred method of submission.

ELECTRONIC WAIVERS:

- Select "Electronic Waivers"
- Enter email addresses for the following:
 - The student
 - Parent/Guardian 1
 - Parent/Guardian 2 (optional)
 - Advisor
 - Email addresses must be different for each.

- An automatically generated email to each recipient will contain a special link to access and complete the electronic waiver. Messages are sent 15-30 minutes after saving this form. The email will resemble the screenshot below. The recipient must click on the link to access the waiver.
 - If an email address is changed after approval, the process starts over.

4. After clicking the link in the email, the waiver will appear and the recipient will sign off in the designated box.



**NATIONAL
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WE BELIEVE IN THE FUTURE OF AGRICULTURE.

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National FFA Agriscience Fair
Waiver, Release of Liability, Consent to Medical Attention, Authorizations and Certifications

National FFA Organization
Waiver, Release of Liability, Consent to Medical Attention, Authorizations and Certifications

FFA ID: [REDACTED] Name: [REDACTED] State: [REDACTED]
Program / Event: **National FFA Agriscience Fair / Power, Structural and Technical Systems: Div 2**

In exchange for my being allowed to participate in this program, administered by the National FFA Organization ("FFA"), I, and if I am not 21 years old, my parent or legal guardian (individually and collectively referred to below in the first person singular) agree to be bound by the following:

- Voluntary Participation.** I understand and confirm that my participation in the Program is voluntary.
- Identification of Risks.** I understand that FFA and its representatives may not be present during my participation in the Program. I understand that my participation in the Program may involve risk of injury and loss, both to person and to property. I also understand that the risk of injury may include the possibility of permanent disability and death.
- Assumption of Risk.** I assume all risks, known and unknown, foreseeable and unforeseeable, in any way connected with my participation in the Program. I accept personal responsibility for any liability, injury, loss or damage in any way connected with my participation in the Program.
- Release and Waiver.** I release FFA and its directors, officers, employees, agents, volunteers, successors, and assigns from any and all liability for and waive any and all claims for injury, loss, or damage, including attorneys' fees, in any way connected with my participation in the Program (a "Claim"), whether or not caused in the whole or part by the negligence of FFA or any of the individuals mentioned above.
- Consent to Medical Treatment.** I authorize FFA to provide to me, through medical personnel of its choice, customary medical assistance, transportation, and emergency medical services. This consent does not impose a duty upon FFA to provide such assistance, transportation, or services.
- Publication.** I authorize FFA to use my name, photo, materials produced for the program, or presentation in program for FFA materials, including but not limited to, educational resources, press releases, web-based publicity, & other publicity materials.
- Severability.** Each term and provision of the instrument shall be valid and enforced separately to the fullest extent permitted by law.
- Applicable Law.** This instrument shall be governed, construed, and enforced in accordance with the law of the State of Indiana.
- Participant's certification of eligibility and original effort, and authorization to use materials:**
 - I hereby certify that I meet all eligibility requirements for participation in the above cited FFA program for the current year, as set forth by the National FFA Constitution.
 - Any material submitted is the result of my own effort and ability. However, in securing information as direct quotes or phrases, specific dates, figures or other materials, such must be marked in "quotes" in manuscripts and are identified in the bibliography at the end of the manuscript. Failure to do so represents plagiarism and will automatically disqualify a contestant. (Action of Boards of National Officers and Directors, October, 1960.)
- Consent.** I agree to abide by the FFA Code of Ethics, as stated in the Official Manual, as well as the code of conduct and guidelines for participation in this program.

THIS IS A WAIVER AND RELEASE OF LIABILITY. I HAVE READ THIS WAIVER, RELEASE OF LIABILITY AND CONSENT. I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. I AM SIGNING THIS WAIVER, RELEASE OF LIABILITY AND CONSENT VOLUNTARILY. I UNDERSTAND THAT IF I MAKE CHANGES TO THE TERMS OF THIS WAIVER AND RELEASE OF LIABILITY, I WILL NOT BE ABLE TO PARTICIPATE IN THIS PROGRAM.

Electronic Signatures

PARTICIPANT: Name [REDACTED] Email Address [REDACTED] Date [REDACTED]
If the person participating in the program is not yet 21 years old, both parent(s) or the legal guardian(s) must sign.
☐ Checkmark if participant is 21 years or older.

In exchange for my/our child or ward being allowed to participate in the Program, and as the parent(s) or legal guardian(s) of the above-named individual, I/we verify that I/we fully understand, agree to, and accept all provisions of this Waiver, Release of Liability and Consent.

PARENT/GUARDIAN 1: Name [REDACTED] Email Address [REDACTED] Date [REDACTED]
PARENT/GUARDIAN 2: Name [REDACTED] Email Address [REDACTED] Date [REDACTED]
ADVISOR: Name [REDACTED] Email Address [REDACTED] Date [REDACTED]
Advisor's Phone Number during Program: [REDACTED]

For questions about CDE or LDE waivers, please contact cde@ffa.org.

For questions about agriscience fair waivers, please contact agriscience@ffa.org.