



Student Liability Waiver & Release Sign In/Out Permission Slip

(Student Name) _____ has my permission to sign in and out of National STEM Academy (Museum of Aviation Foundation) program each day. By doing so, this releases the National STEM Academy, Museum of Aviation, and Museum of Aviation Foundation of any liability that may be ensued by (Student Name) _____ walking in buildings, between buildings, two and from the parking lot, etc.

Program Name: _____

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____

Date: _____ Phone Number: _____