



# ALAKA`INA DIGITAL BUS WAIVER: VOLUNTEER/ADULT



Participants must read and sign this form PRIOR to participating in a project or program with the Alaka`ina Digital Bus.

Dear Participant,

Mahalo (thank you) for supporting the Alaka`ina Digital Bus Program. Our mission is to cultivate skills and interest in science & technology among the youth of Hawai`i. During an Alaka`ina Digital Bus project you will utilize cutting edge technology & science equipment on board the Digital Bus and/or in the classroom. Some projects involve field-based research, in which case the classroom teacher will provide additional field trip permission forms and transportation arrangement information. \*Please note the Alaka`ina Digital Bus does not transport children. It is a mobile science and technology classroom which students use only while the bus is parked.

**SECTION A: To be completed by the Teacher**

Print Teacher Name:	School/Organization:
Project:	Island: <input type="checkbox"/> Maui <input type="checkbox"/> Moloka`i

\_\_\_\_\_ (initial here). As the supervising organizer from the school/organization mentioned above, I will maintain supervision responsibilities of students during the Alaka`ina Digital Bus Projects.

**SECTION B: To be completed by the Participant**

Print Participant Full Name:	Date(s) Participated:
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I will participate in activities on and relating to the Alaka`ina Digital Bus. I understand that I will not be riding on the Digital Bus for transportation purposes, but that I will instead use the Alaka`ina Digital Bus to participate in technology and science related learning activities. I understand these activities will take place on the bus, in nearby outdoor settings, and the school classrooms. I understand that any inappropriate or unacceptable conduct during my access to and use of the Alaka`ina Digital Bus, including inappropriate use of the internet, shall be grounds for revoking or suspending my access to and use of the Alaka`ina Digital Bus. Furthermore, I understand that such conduct may result in additional discipline as determined by the sponsoring organization.

**SECTION C: PHOTO/PUBLICATION RELEASE** *Signed letter of reason must be attached if opting out Of the Photo/Publication Release.*

**Permission for Publication:**  
I understand and agree that my work created or otherwise generated & photo while using the Digital Bus could be published on the Internet at the sole discretion of Alaka`ina. I understand and agree that my picture taken while participating in the Digital Bus project could be published either in print (i.e. brochures, fliers, newspaper) and/or on the Internet (i.e. Digital Bus website) at the sole discretion of Alaka`ina. No home address, telephone number, or last names will appear with such work or photographs. Participants appearing in a group photo will not be identified individually.

**Waiver and Release:**  
I agree to waive and release the Alaka`ina Digital Bus Program, any & all partnering programs, contractors, & funding sources (its officers, directors, employees, and agents) and agree not to sue any such person for any claims arising from the publication of my work or image generated while I participate in the Alaka`ina Digital Bus Program/Project as set forth in this waiver form.

**SECTION D: Strictly for reporting & funding purposes ONLY. Please fill in completely.**

**Ethnicity: Check all that applies.**

White or Caucasian     Hispanic or Latino     Japanese     Hawaiian     Black or African American  
 Chinese     Filipino     Other: \_\_\_\_\_

Participant's Birthdate: \_\_\_\_\_ Gender:  Male     Female     Non-binary

City: \_\_\_\_\_ Zip code: \_\_\_\_\_

**WAIVER AND RELEASE**

I agree to waive and release the Alaka`ina Digital Bus Program, any & all partnering programs, contractors, & funding sources (its officers, directors, employees, and agents) and agree NOT to sue any such person for any claims arising from an accident / incident while accessing or using the Alaka`ina Digital Bus equipment and vehicles and/or participation in its project as stated in this form. **I have read and fully understand this PARTICIPANT WAIVER FORM and agree to be bound hereby, and to comply therewith.**

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Email: \_\_\_\_\_ Phone: \_\_\_\_\_