



**Underage Housing Policy**

We understand our child must live in a homestay placed by WCC if under the age of 17. We understand that our child must live in either a homestay or in Cedar Hall (WCC residence hall) if 17. We acknowledge that our child is under the age of 18 (legal adult status in the United States), and that we, not the host family nor Whatcom Community College, will be held responsible for our child’s actions and any loss, damage or injury resulting therefrom while he/she lives in the United States. We agree to indemnify, release and hold harmless Whatcom Community College, its board of trustees, officers, employees, agents, volunteers and assigns, including the host family, from and against any and all injury, loss, damage, accident delay, expense or other claim of any nature resulting from our child’s participation in the homestay or residence life programs. We understand that we must co-sign the housing contract for Cedar Hall with our child if he/she is under 18 at the time of move in. We understand that there is no 24/7 supervision of students in Cedar Hall. We understand that if our child is removed from Cedar Hall, he/she will not be allowed to enter the Homestay program. We understand that if our child is removed from Cedar Hall while under the age of 18, he/she will have no housing options available and will be required to leave Whatcom Community College and return home at our (parent/ guardian’s) expense.

**Medical Consent**

We authorize and consent to any and all routine and emergency medical, dental or psychological care for our child as recommended by the child’s treating doctor or psychologist, including surgical and hospital care. We agree to be financially responsible for all medical attention so authorized or ordered during our child’s time at Whatcom Community College.

**Activities Consent and Liability Waiver**

We give our child permission to participate in any activities officially sponsored by WCC. We understand and acknowledge that there is risk of injury to my child by his/her participation in off campus activities and trips. I also understand that it is voluntary for my child to participate, and that the college does not require his/her participation. I hereby assume any and all of these risk of injuries that may result from my child’s participation in these activities. I hereby release Whatcom Community College, its board of trustees, officers, employees, agents, volunteers and assigns, including host families from and against any and all claims or damages that my child may suffer arising out of, or in connection with, his or her participation in trips and/or activities. I also agree to indemnify, release and hold harmless Whatcom Community College, its board of trustees, officers, employees, agents, volunteers and assigns, including the host family from and against any action, claim, or proceeding initiated as a result of any injury suffered by my child or any third party through his/her participation in trips and/or activities.

We hereby acknowledge, accept, and agree to the above named terms and conditions.

Parent/Legal Guardian signature: \_\_\_\_\_

Date: \_\_\_\_\_

(If submitting electronically, your typed name will serve as a signature)

Preferred telephone number: \_\_\_\_\_

Email: \_\_\_\_\_

**Students under age 18 and their Parents complete this form**

Does family/legal guardian speak English? Yes / No

Language/s spoken: \_\_\_\_\_

**Missing Person Contact**

Students living in homestay and Cedar Hall have the option to identify a Missing Person Contact. Your Missing Person Contact gets notified in the event that you are determined to be missing. This information will remain confidential and is made available only to authorized campus officials and law enforcement officers in furtherance of a missing person investigation.

Missing Person Contact Name: \_\_\_\_\_

Missing Person Contact Phone Number: \_\_\_\_\_

I certify that I want the above person contacted in the case that I am determined to be missing. I understand that if I am less than 18 years of age, my parent or guardian will be notified in the case that I am missing. Parent/guardian notification will occur in addition to notification of the Missing Person Contact, if the Missing Person Contact is someone other than a custodial parent/guardian.

Printed Student Name:

\_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

(If submitting electronically, your typed name will serve as a signature)

**Student Release of Information**

If living in a Whatcom Community College Homestay, I agree to follow all applicable Whatcom Community College Homestay policies as outlined in the Homestay Program Student/Host Expectations document and acknowledge having reviewed said document. If living in Whatcom Community College Residence Life, I agree to follow all applicable Whatcom Community College Residence Life policies as outlined in the Residence Life Handbook and acknowledge having reviewed said document. Whatcom Community College may also contact my parents, guardians, and/or educational agent at any time with concerns they may have about academic or personal matters, including any housing violations.

I hereby acknowledge, accept and agree to the above named terms and conditions.

Printed Student Name:

\_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

(If submitting electronically, your typed name will serve as a signature)

**Students under age 18 and their Parents complete this form**

Notice of Non-Discrimination: WCC complies with federal and state laws specifically requiring that the College does not discriminate on the basis of race, color, national origin, religion, sex, disability, sexual orientation, or age in its programs and activities