



**BRIGHT LIGHTS PARENTAL AUTHORIZATION
Rocket Blast and Rocket Quest**

Return to: Bright Lights, 5561 S. 48th St., Suite 220
Lincoln, NE 68516

Fax 402-420-5954 | registrations@brightlights.org

Student Name: _____ **Class:** _____

Dear Parents/Guardians,

The students in the classes listed will be completing projects that will include launching rockets powered by the combustion of solid-type rocket fuel. Students will receive specific safety instructions from the teacher on maintaining appropriate distance between themselves and a rocket during launch and recovery. Students will be expected to follow all safety procedures identified, demonstrated and reviewed by the teacher and remain in designated areas during launches.

This signed release must be received in the Bright Lights office before your child may participate in this class.

Parent Acknowledgement

- I realize that participation in this class involves the potential for injury.
- I understand and acknowledge that if my student receives professional medical and/or related services due to an injury, parents are obligated to pay for such services; Bright Lights and/or NE Wesleyan University shall not be liable for payment of such services.
- Equipment that is intentionally damaged or lost will be the responsibility of the students.
- I understand that Bright Lights is not responsible for any injury that should occur to my child while participating in this program.

X _____
Parent/Guardian Signature - Required

Date