

Homeroom Teacher _____ Grade _____

My child _____
 has raised at least **\$5 in donations** for
 Jump Rope For Heart.

Signed by _____
 (his/her parent)

Rory Donation

- Uncomfortable pressure, squeezing, fullness or pain in the center of the chest that lasts more than a few minutes or goes away and comes back.
- Pain or discomfort in one or both arms, the back, neck, jaw or stomach.
- Shortness of breath with or without chest discomfort.
- Breaking out in a cold sweat, nausea or lightheadedness.

Not all of these warning signs occur in every heart attack. If some start to occur, get help immediately. Heart attacks are a medical emergency — CALL 9-1-1.



JUMP ROPE FOR HEART

Parent/Guardian Permission

As the parent or guardian of the student listed below ("Child"), I hereby understand and agree that:

- 1) Events** — My Child and I expressly assume all risks, including potential personal injury and fatality, which may arise out of my Child's participation in any school events that are sponsored by or affiliated with the American Heart Association ("AHA"). Such events may include but are not limited to Football For Heart, Hoops For Heart, Jump Rope For Heart, Red Out, and any other similar sponsored activities that my Child's school may offer ("Events"). My Child's school may on its own develop Events that follow the heart-healthy programs of the AHA, may involve online charitable fundraising for the AHA, and any such Events are also covered by this Form.
- 2) Being Prepared** — It is my sole responsibility to ensure that my Child's clothing and any equipment are properly fitted and appropriate for use in any Event, and that my Child is physically fit and able to participate in any Events. Prior to any Event, I will instruct my Child to stop and request assistance if he/she experiences any adverse physical symptoms such as, but not limited to, dizziness, excessive fatigue, shortness of breath, pain or any other conditions that would make it difficult or unsafe to continue in the Event.
- 3) Optional Online Participation** — Some of the Events may offer the option of my Child being able to register for an AHA online fundraising program. This program allows students to track their individual and team's progress while having access to the AHA's educational and fundraising resources. My Child would have the option of including a photo on his/her site as well as sending out emails to family and friends in support of his/her participation. For more information, go to www.heart.org/jump. I acknowledge the Direct Notice to Parents and Children's Privacy Statement on that site. I understand and agree that if I do not want my Child to participate in such online activities, then it is my sole responsibility to prevent my Child from doing so.

Release and Indemnity Agreement

I agree, for myself, my Child/Ward, and our heirs, executors and administrators, to not sue and to release, indemnify and hold harmless the American Heart Association, Inc., its affiliates, officers, directors, volunteers and employees and all sponsoring businesses and organizations and their agents and employees, from any and all liability, claims, demands, and causes of action whatsoever, arising out of my Child's participation in any American Heart Association sponsored or affiliated school Events and related activities, including but not limited to online activities, whether it results from the negligence of any of the above or from any other cause. This agreement shall be as broad and inclusive as is permitted by the State in which the event is conducted. If any portion of it is held invalid, the balance shall continue in full force and effect. I have read, understand and agree to the terms of this Release and Indemnity Agreement.

Media Release

I authorize the use, copyright, or publication of my Child's name, image or voice while participating in any Event and related activities, as may be captured by photograph or recording in any medium for any purpose, including illustration, promotion or advertisement.

I am the parent or legal guardian of the participant, and I hereby consent to his/her participation in Events and related activities. I have read and explained this Form to my Child, and I hereby agree to all of its terms and conditions on behalf of myself and my Child.

Parent/Guardian's Printed Name _____ Signature _____ Date _____

Yes, I will be a parent volunteer and help with this event. I may be reached at this phone number: _____

Student's Printed Name _____ Home Room Teacher's Name _____ Date _____

Student's Signature (required if 18 years or older) _____



DONATION FORM



STUDENT'S FIRST NAME _____ STUDENT'S LAST NAME _____

GRADE _____ ROOM # _____ TEACHER'S NAME _____

NAME OF SCHOOL _____

EVENT DATE _____ RETURN THIS ENVELOPE TO TEACHER BY THIS DATE _____

I'M JUMPING IN HONOR OF _____

I WANT TO GIVE MORE, SO PLEASE DO NOT SEND GIFTS. **PLEASE CONVERT ALL CASH TO A CHECK(S) PAYABLE TO THE AMERICAN HEART ASSOCIATION.**
All donors who make donations online will receive a donation receipt.

Don't forget to share your challenge with others. Here's a script you can use:

My school is participating in Jump Rope For Heart where I am learning how to keep my heart healthy. I accepted a challenge to:

- Choose to drink water instead of sugary drinks
- Be physically active for 60 minutes a day
- Eat a fruit or veggie with every meal

Will you accept this challenge with me? I've also set a goal to raise \$___ to fund lifesaving research and programs that help our community. Please support me by making a donation to the American Heart Association.

Paid	Donor's Name and Challenge	Cash/Check or Money Order Donation	Online Donation	Company Matching Gift Forms*	TOTAL Donations
<input checked="" type="radio"/>	Julie Jump Rope-Eat a fruit or veggie with every meal	\$25.00	INCLUDE DONATION REPORT	\$0	\$25.00
<input type="radio"/> 1.					
<input type="radio"/> 2.					
<input type="radio"/> 3.					
<input type="radio"/> 4.					
<input type="radio"/> 5.					
<input type="radio"/> 6.					
<input type="radio"/> 7.					
<input type="radio"/> 8.					
<input type="radio"/> 9.					
<input type="radio"/> 10.					
<input type="radio"/> 11.					
<input type="radio"/> 12.					
<input type="radio"/> 13.					
<input type="radio"/> 14.					
TOTAL DONATIONS		\$	\$	\$	\$

If you have raised \$50 or more, you've earned a T-shirt! Please mark your size:

Youth: S M L Adult: S M L XL XXL 3XL

*Double Your Donations! Ask your sponsors if they work for a matching gift company and ask for their company form to include in this envelope. Example: \$25 donation = \$50 for your total donation. (FORM MUST BE INCLUDED WITH DONATION.) Check out matchinggifts.com/AHA for more information!