



2025 INDIANA REGIONAL CANE QUEST PARENT PERMISSION FORM

Due Date: December 13, 2024

SUBMIT THIS COMPLETED PERMISSION FORM TO:

Indiana School for the Blind and Visually Impaired, 5050 East 42nd Street Indianapolis, IN 46226, Attn: Cara Burchett at cburchett@isbvik12.org or (317) 253-1481 if you are unable to scan/email.

Cane Quest seeks to motivate blind and visually impaired youth to practice proper safe travel techniques and overall orientation and mobility skills. It's designed to promote a student's confidence in any surrounding and build true mobility independence.

The Contest will be held on January 26th, 2025.

CONTEST DESCRIPTION:

1. Cane Quest, a program of Braille Institute, is open to visually impaired students in grades 3-12 who have received instruction in the use of the white cane, and who are both cognitively and physically able to walk independently for an hour at a time.
2. A student should be familiar with the skills on the checklist, but does not have to have mastered all of them.
3. A student's visual acuity must fall within the B1 through B2 classification range as defined by the United States Association of Blind Athletes.
 - **Class B1** - No light perception in either eye up to light perception, but inability to recognize the shape of a hand at any distance or in any direction.
 - **Class B2** - From ability to recognize the shape of a hand up to visual acuity of 20/600 and/or a visual field of less than 5 degrees in the best eye with the best practical eye correction.

Student's Last Name _____ First Name _____

Address _____ Unit/Apt. No. _____

City _____ State _____ ZIP _____

Telephone _____ E-mail _____

Name of School _____

Name of School District _____

Student's Age _____ Student's Grade _____ Student's T-Shirt Size (circle one) Adult S M L XL XXL
Youth S M L

O&M Specialist's Name _____

O&M Specialist's Email _____

O&M Specialist's Cell _____

A separate skills checklist must be completed by your child's Orientation & Mobility Specialist to validate skill level and visual acuity.



Contestant Name: _____

PERMISSION

As the parent or guardian of the contestant, I hereby give permission for the contestant to participate in Cane Quest (“Event”), a program of Braille Institute of America, Inc. (“BIA”), sponsored by LDB, to be held on January 26, 2025.

LIABILITY RELEASE AND INDEMNIFICATION

In consideration of BIA and LDB permitting the contestant to participate in the Event, I, on behalf of myself, the contestant, our heirs, successors and assigns, hereby waive and release, and agree to indemnify and hold harmless, BIA and LDB, their employees, officers, directors, volunteers and agents, including regional coordinators (collectively “Releasees”) from, any and all claims, including claims of negligence, resulting in any physical or psychological injury, illness, damages, or economic or emotional loss, arising from or related to the contestant’s participation in the Event.

PHOTOGRAPHIC AND RECORDING RELEASE

I hereby authorize Leader Dogs for the Blind (LDB) and BIA to photograph, videotape, or otherwise record by visual, audio, electronic or manual means, the name and visual likeness and/or voice or other sounds created by the above contestant (collectively “Reproductions”). LDB and BIA may use, distribute, permit, copyright, and/or license the Reproductions in any exhibition, display, publication, solicitation, or promotional or educational material, in any format, or on any website including without limitation the websites of LDB and BIA and social networking websites such as Facebook, Instagram, or YouTube without compensation to the contestant, the contestant’s heirs, successors or assigns.

I have read this permission and release form, and understand that by signing it, I am giving up substantial rights I and/or the contestant would otherwise have to sue or recover damages for losses occasioned by the Releasees’ fault. I sign this permission and release form voluntarily.

Parent/Guardian Signature

Date

Print Name

