

## MakerSpace - MHS Media Center

### Student Safety Pledge

I, \_\_\_\_\_, pledge to follow all safety instructions, rules, and regulations for operating tools and equipment of the MHS MakerSpace. In particular, I will:

1. Follow all safety rules for the lab.
2. Only use or operate a machine with first having permission from the instructor, as well as proper instruction and training in the operation of that machinery.
3. Immediately report all injuries or accident to the instructor.
4. Not engage in behaviors that endanger my own, or others, personal safety in the MakerSpace.

This safety pledge for students is based on:

1. The student having received proper instruction from the instructor.
2. The student assuming responsibility for following prescribed safety rules and procedures.
3. Written permission from the students parents/guardians.

I have read and understand the above. I understand that if I am not true to this pledge that it may result in my suspension from the MakerSpace and Administrative disciplinary action.

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

I understand there are risks involved, and hereby give my consent to allow my student to operate all tools, machinery, and equipment available in the MHS MakerSpace.

Parent: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parents are invited to visit the MakerSpace to inspect the machines and to see them in operation.

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Parent Agreement

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

I have reviewed the Student Safety Pledge and I understand the type of facility in which my son/daughter is participating. I will stress the safety aspects of this program to my child. I encourage my child to participate fully in MakerSpace.

Parent: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone (1) \_\_\_\_\_ Phone (2) \_\_\_\_\_

Health Concerns

Please identify any health problems that should be considered regarding your child's participation in the MakerSpace:

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I agree to observe all safety rules and procedures for safe operation and conduct in the MHS MakerSpace and will wear approved eye protection when required.

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