

FORM D: PARENT/GUARDIAN RELEASE FOR MINOR PARTICIPANT

BY SIGNING THIS DOCUMENT, YOU ARE WAVING CERTAIN LEGAL RIGHTS. READ CAREFULLY BEFORE SIGNING.*

GENERAL RELEASE AND INDEMNITY AGREEMENT

I hereby represent that I am the parent or legal guardian of _____, "PARTICIPANT", who is under the age of 18. For and in consideration of Baylor University permitting PARTICIPANT to participate voluntarily in the Challenge Course Ropes / Team Building Event with _____ (GROUP NAME), hereafter referred to as "EVENT," at Baylor University in Waco, Texas as scheduled from June 1, 2013 through May 31, 2014, I hereby expressly assume all the risks associated with the EVENT and I release Baylor University, its regents, officers, employees, students, and agents from all claims, demands, suits, causes of action, or judgments which participant or I ever had, now have, or may have in the future or which our heirs, executors, administrators, or assigns may have, or claim to have against Baylor University, its regents, officers, employees, students, or agents, arising out of or in any way connected with the EVENT, for all personal injuries, known or unknown, property damages, or claims for wrongful death, caused by the

ACTS, OMISSIONS OR NEGLIGENCE

of Baylor University, its regents, officers, employees, students, or agents.

I FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS BAYLOR UNIVERSITY, ITS REGENTS, OFFICERS, EMPLOYEES, STUDENTS, AND AGENTS FROM ALL CLAIMS, DEMANDS, SUITS, CAUSES OF ACTION, OR JUDGMENTS WHICH PARTICIPANT OR I EVER HAD, NOW HAVE, OR MAY HAVE IN THE FUTURE OR WHICH OUR HEIRS, EXECUTORS, ADMINISTRATORS, OR ASSIGNS MAY HAVE, OR CLAIM TO HAVE AGAINST BAYLOR UNIVERSITY, ITS REGENTS, OFFICERS, EMPLOYEES, STUDENTS, OR AGENTS, ARISING OUT OF OR IN ANY WAY CONNECTED WITH THE EVENT, FOR ALL PERSONAL INJURIES, KNOWN OR UNKNOWN, PROPERTY DAMAGES, OR CLAIMS FOR WRONGFUL DEATH, CAUSED BY THE ACTS, OMISSIONS OR NEGLIGENCE OF BAYLOR UNIVERSITY, ITS REGENTS, OFFICERS, EMPLOYEES, STUDENTS, OR AGENTS, AND ON BAYLOR'S BEHALF AND IN BAYLOR'S NAME DEFEND AT MY OWN EXPENSE ANY SUCH CLAIMS, DEMANDS, SUITS, CAUSES OF ACTION OR JUDGMENTS DESCRIBED ABOVE.

I have read and executed this document with full knowledge of its legal significance.

BY: _____
PARENT/LEGAL GUARDIAN SIGNATURE DATE

Name Printed: _____
(FORM D) REVISED 05.11.11

*If you are a Baylor employee or a dependent of a Baylor employee, this release shall not be construed to deny any valid direct or first party insurance claims which you or PARTICIPANT may have relating to possible death or to any injuries you or PARTICIPANT may sustain while participating in the EVENT.