

DEPARTMENT OF RISK MANAGEMENT 1950 THIRD ST, LA VERNE, CALIFORNIA 91750-4401

WAIVER AND RELEASE OF LIABILITY AND INDEMNITY AGREEMENT PARTICIPANT

Event	Dates
IN CONSIDERATION for allowing the participant to observe or participate in any we encompassed by this Agreement and/or permitting the participant to enter for any purpose the U as follows:	
THE PARTICIPANT HEREBY RELEASES, WAIVES, DISCHARGES AND COVVERNE, its officers, agents, or employees (hereinafter referred to as 'releasees') from all liability claim or demands therefore on account of injury to the person or property or resulting in death of the releasees or otherwise, while the undersigned is in, upon, or about the premises or any factors.	ty to the undersigned for any loss or damage and any of the undersigned, whether caused by the negligence
THE PARTICIPANT HEREBY AGREES TO INDEMNIFY AND SAVE AND HO any loss, liability, damage or cost they may incur due to the presence of the undersigned in, upo premises or on any field trip, or in any way observing or using any facilities or equipment of the the negligence of the releasees or otherwise.	on or about the UNIVERSITY OF LA VERNE
THE PARTICIPANT HEREBY ASSUMES FULL RESPONSIBILITY FOR AND PROPERTY DAMAGE due to the negligence of releasees or otherwise while in, about or upon on any University of La Verne authorized field trip and/or while using the premises or any facil	the premises of the UNIVERSITY OF LA VERNE o
THE PARTICIPANT further expressly agrees that the foregoing WAIVER AND REAGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effective and the state of t	f California and that if any portion thereof is held
THE PARTICIPANT further expressly agrees that in the event of an accident (or such perform whatever medical emergency treatment that may be deemed necessary on the named in	
THE PARTICIPANT has no knowledge of any physical impairment that may be affectivities stated below.	ected by the participant listed, participating in the
THE PARTICIPANT further agrees that they have read, understand, and agree to confor said activity.	mply with the rules and safety provisions established
THE PARTICIPANT HAS READ AND VOLUNTARILY SIGNS THE WAIVER AGREEMENT, and further agrees that no oral representations, statements or inducement apart made.	
THE PARTICIPANT HAS READ AND VOLUNTARILY SIGNS THE WAIVER AND AGREEMENT AND DOES SO VOLUNTARILY AND WITH THE UNDERSTANDING TH UP.	
I HAVE READ THIS RELEASE	
Participant Signature	Date
Printed Name of Participant:	D.O.B
Address of Participant:	