

Date: \_\_\_\_\_

Student's Name (print): \_\_\_\_\_

Instructor's Name: \_\_\_\_\_

Course title: \_\_\_\_\_

### **Waiver and Release Agreement**

As a student in the ABC Adult School, I may be photographed or filmed for campus or district displays and for other publicity and public relation purpose. Signature on the registration form or by completing my registration online indicates my agreement for these purposes. I, the undersigned, also do hereby agree to indemnify and hold harmless the ABC Unified School District, its agents, officers, employees and volunteers from all harm, accidents, personal injury or property damage which may be suffered by the aforementioned individual, arising out of, or in any way connected with, participation in this class or activity.

Student's Signature: \_\_\_\_\_

Date: \_\_\_\_\_