



UNIVERSITY OF INCARNATE WORD
RELEASE, WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT
for Minor's Use of UIW Facilities and Equipment and/or Transportation

Please print and complete in full.

1. PARTICIPANT
 - a. Name _____
 - b. Address (Street, City, State, Zip) _____
 - c. Date of birth _____
2. Parent/Guardian Name (and address if different) _____
3. ACTIVITY/FIELD TRIP (Description) _____

Authority: I represent and acknowledge by my signature below that I am the Parent or Legal Guardian of the Participant who is under eighteen years of age and who will be participating in an activity/field trip at Incarnate Word High School, St. Anthony Catholic High School and/or the University of the Incarnate Word (collectively referred to as "UIW"). I am fully competent to sign this Agreement. I understand that Participant's attendance is voluntary. I give permission for Participant to participate in the activity or field trip and if transportation will be provided by UIW, I give permission for Participant to be transported by UIW. I acknowledge that I am signing this Release, Waiver of Liability and Hold Harmless Agreement on my behalf and on behalf of Participant and that Participant and I shall be bound by the terms of this Agreement.

Assumption of Risk: I acknowledge and accept that the mode of transportation and nature of the field trip or activity may expose Participant to hazards and risks to Participant's health, including injury or death, and that UIW cannot control these risks. I understand and I accept all risk to Participant's health, including any injury or death that may result. I acknowledge there may be physically strenuous activities and certify by my signature that I have taken such steps as I deem appropriate to assure myself that Participant is fit and capable of such participation. I agree that while participating in this field trip or activity, Participant will adhere to all applicable rules, regulations, and laws. I understand that UIW will not be responsible for any expenses associated with any property or personal injury Participant may sustain. I understand that UIW does not and will not provide medical insurance for Participant.

Release: In consideration of UIW providing the opportunity for Participant to participate in the field trip or activity and in transporting Participant, I release UIW, and its Board of Trustees, officers, employees, and representatives from any and all liability to me, to Participant, our personal representatives, estate, heirs, and assigns for any and all claims, demands and causes of action for any and all loss of personal property, illness or injury to Participant, including Participant's death, arising out of, caused by, occurring during or in any way connected with the field trip/activity, including injuries caused by negligence of UIW, its Board of Trustees, officers, employees, and representatives, or any other participant in the field trip or activity that may be sustained by Participant while participating in such field trip/activity, or while on premises owned, operated or leased by UIW.

Indemnity, Hold Harmless, and Waiver: I agree to indemnify and hold harmless, waive and covenant not to sue UIW, its Board of Trustees, officers, employees, and representatives from liability for the injury or death of any person(s) and damage to property that may result from Participant's negligent or intentional act or omission while participating in the field trip or activity. It is my express intent that this covenant not to sue and agreement to hold harmless shall bind the members of my family, Participant's family, and our heirs, assigns and personal representatives, if Participant or I become deceased.

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND THAT IT IS A RELEASE, WAIVER AND HOLD HARMLESS OF LIABILITY OF ALL CLAIMS FOR PARTICIPANT'S INJURY OR DEATH THAT MAY OCCUR WHILE PARTICIPATING IN THE FIELD TRIP OR ACTIVITY AND IT OBLIGATES ME AND PARTICIPANT TO INDEMNIFY THE PARTIES NAMED FOR ANY LIABILITY FOR INJURY OR DEATH OF ANY PERSON AND DAMAGE TO PROPERTY CAUSED BY PARTICIPANT'S NEGLIGENT OR INTENTIONAL ACT OR OMISSION.

THIS DOCUMENT WILL BE CONSIDERED EFFECTIVE ON THE DATE SIGNED.

Parent/Guardian's Signature: _____
 Date: _____