Participant's name:		
Tarterpaires name.		Please Print
UNIVERSITY OF CALIFO Student Promoted Access Center for Education and Service (Engineering Studen Waiver of Liability, Assumption of Ris	SPACES), Black Student Union ont Center	
Waiver: In consideration of being permitted to participa	te in any way in	
SIAPS, BSU, and IDEA Center Overnigl	nt Programs, April 12-14, 2018	
hereinafter called "The Activity", I, for myself, my heirs, release, waive, discharge, and covenant not to sue The officers, employees, and agents from liability from any a The Regents of the University of California, its officer injury, accidents or illnesses (including death), and proper participation in The Activity.	Regents of the University of Cand all claims including the res, employees and agents, resu	California, its negligence of ulting in personal
Signature of Parent/Guardian of Minor Date	Signature of Participant	Date
Assumption of Risks: Participation in The Activity carreliminated regardless of the care taken to avoid injuries. another, but the risks range from 1) minor injuries such a injuries such as eye injury or loss of sight, joint or back it catastrophic injuries including paralysis and death. I have read the previous paragraphs and I known other risks that are inherent in The Activity. I hereby that I knowingly assume all such risks.	The specific risks vary from o s scratches, bruises, and sprain njuries, heart attacks, and concow, understand, and apprecia	one activity to as 2) major cussions to 3)
Indemnification and Hold Harmless: I also agree the University of California HARMLESS from any and a expenses, damages and liabilities, including attorney's fe The Activity and to reimburse them for any such expense	all claims, actions, suits, proceed es brought as a result of my in	dures, costs,
Severability: The undersigned further expressly agrees risks agreement is intended to be as broad and inclusive a California and that if any portion thereof is held invalid, notwithstanding, continue in full legal force and effect.	as is permitted by the law of th	e State of
Acknowledgment of Understanding: I have read this windemnity agreement, fully understand its terms, and underights, including my right to sue. I acknowledge that I voluntarily, and intend by my signature to be a completo the greatest extent allowed by law.	lerstand that I am giving up am signing the agreement free	substantial ely and
Signature of Parent/Guardian of Minor Date	Signature of Participant	Date

Participant's Age (if minor) ___

Vol Waiver 7/01