UNIVERSITY OF CALIFORNIA, DIVISION OF AGRICULTURE & NATURAL RESOURCES

___ County Cooperative Extension 4-H Youth Development Program

Name of Facility/Class/Activity: ______

WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

Waiver: In consideration of being permitted to participate in any way in	, I, for myself, my heirs, personal			
representatives or assigns, do hereby release, waive, discharge, and covenant not to sue The Regents of the University o	f California, its officers, employees, and agents from			
liability from any and all claims including the negligence of The Regents of the University of California, its officers, employees and agents, resulting in personal injury,				
accidents or illnesses (including death), and property loss arising from, but not limited to, participation in	·			

Assumption of Risks: Participation in ______ carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains; 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions; 3) catastrophic injuries including paralysis and death. The powder used is 100% cornstarch based. Wearing sunglasses or goggles, and a bandana over your mouth and nose in the color zones for extra protection is recommended.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in ______. I hereby assert that my participation in voluntary and that I knowingly assume all such risks.

Indemnification and Hold Harmless: I also agree to INDEMNIFY AND HOLD The Regents of the University of California HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in ______ and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgement of Understanding: I have read this waiver, assumption of risk, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

DO NOT SIGN BELOW UNLESS YOU HAVE THOROUGHLY READ AND UNDERSTOOD THE ENTIRE CONTENTS OF THIS RELEASE FORM.

Participant Name – PRINT CLEARLY	Signature of Participant	Participant Age (if a minor)	Parent/Guardian Name – PRINT CLEARLY	Signature of Parent/Guardian (if participant is a minor)	Date