



**HOLD HARMLESS, RELEASE, WAIVER of LIABILITY  
and COVENANT NOT TO SUE  
(Parental Consent and Release of Liability Waiver)**

I, \_\_\_\_\_, the parent or legal guardian of \_\_\_\_\_, a participant in the Albany State University's \_\_\_\_\_ program scheduled on \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, do hereby enter into this Parental Consent Form and Release of Liability Waiver for the purpose of authorizing the above named student's participation in the enrichment activities, field trips, hands on lab experiments, and other educational activities, which include walking, transportation by motorized vehicle and provision of meals by staff and volunteers associated with the above program. I acknowledge that this is a voluntary activity for which I freely give permission for my child's participation.

I further give my consent for my child to be photographed or videotaped during the activities involved in this learning experience and grant permission to Albany State University (hereinafter "ASU") to use said photos for promotional and/or educational purposes. Said consent is given without any expectation of compensation or reward for any photos taken and/or used in educational and promotional literature.

I agree that my child shall abide by all rules and regulations imposed by the \_\_\_\_\_ staff during the course of this enrichment program. I also acknowledge and accept that participation in the above activity involves certain inherent risks that cannot be eliminated regardless of the care taken. **In consideration for the privilege of the above-named student's participation in said enrichment program, I freely, voluntarily and knowingly assume all risks on behalf of said student as his/her parent or legal guardian.** In the case of emergency, I request the program staff to immediately contact me. If deemed necessary, to provide first-aid medical treatment and/or secure emergency medical treatment for my child. I accept full responsibility for any medical and other ancillary expenses incurred.

I further agree, in consideration of the above-named child's participation in the enrichment activities, including all necessary preliminary and follow-up activities associated with said program, to indemnify, release, hold harmless and discharge the Board of Regents of the University System of Georgia (hereinafter "BOR"), ASU, and/or \_\_\_\_\_, their officers, trustees, agents and employees from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or relating to any loss, damage or injury, including death, that may be sustained by the above named child, or damage to any property belonging to said child whether caused by the negligence of the BOR, ASU and/or \_\_\_\_\_.



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In signing this release, I acknowledge and represent that I have read the foregoing waiver, release, and covenant not to sue, that I understand it, and that I sign it **voluntarily** as my own free act and deed. I further acknowledge that no oral representation, statements or inducements, apart from the foregoing written agreement, have been made and that I am at least eighteen (18) years of age and fully competent. If less than eighteen (18) years of age, a parent or legal guardian has signed, fully accepting each and every term. I (or my parent) execute(s) this Release for full, adequate and complete consideration, fully intending to be bound by same.

So agreed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**IN WITNESS WHEREOF**, I set my hand hereto as of the date set forth below:

**Initial both of the following statements to affirm acceptance of the aforementioned terms:**

\_\_\_\_\_ I certify that I am the parent or legal guardian of the above-named minor. I have read, understood and accept the terms of this entire document and consent to the provisions contained herein. (Signature is required.)

\_\_\_\_\_ I certify that I am at least 18 years of age and suffering under no legal disability and that I have received a copy of this document and have read the above carefully before signing.

\_\_\_\_\_  
**Name of Participant (print)**

\_\_\_\_\_  
**Signature of Participant**  
(If 18 years or older)

\_\_\_\_\_  
**Name of Parent/Legal Guardian (print)**

\_\_\_\_\_  
**Signature of Parent/Legal Guardian**  
(For participant under age 18)

\_\_\_\_\_  
**Signature witnessed by:**

\_\_\_\_\_  
**Name of Witness (print)**

\_\_\_\_\_  
**Signature of Witness**