

Youth Protection Program: Liability Waiver

Event Date(s):

Program:

Participant: Age (at the time of program):
Purpose This form is to be signed by each Participant (or the parent/guardian of any Participant under the age of 19) involved in the Program. In consideration for the educational, social, recreational, and other benefits to be provided, the receipt and adequacy of which is acknowledged, Participant agrees as follows.
Liability Release THIS IS A RELEASE OF LIABILITY. Participant knowingly and voluntarily waives, releases, exculpates, and discharges UA and from and against any and all Potential Liabilitie connected with the Program. By signing this form, the Participant voluntarily agrees to discharge UA, and any third-party entities or contractors in advance from all such Potential Liabilities.
Indemnification The Participant agrees to hold harmless and indemnify UA and from and against Potential Liabilities related to or arising from Participant's involvement in the Program.
Assumption of Risk The Participant understands and acknowledges that there are risks, including significant risks, inherent in all activities that can result in loss, damages, injury, or death, including, without limitation: • Travel/traffic risks such as accidents, crashes, and risks from autos operated by UA of as well as autos operated by other individuals or entities.
 poorly maintained roads, sidewalks, as well as criminal acts that can result in serious injury or death; Premises risks, including those that may be owned by others and risks from water, such as drowning; Injury risks from falls, collisions, or accidents (such as cuts, bruises, torn muscles, sprains, broken bones concussion, etc.); Outdoor risks, such as weather, lightning, heat or cold, insect bites/stings, allergic reactions to plants dehydration, hypothermia, drowning, sunburn, animals, and limited access to medical care; Risks from others involved in the Program such as transmitted illnesses or others' actions;

• **Equipment risks,** including failure, misuse, inherent risks, and risks from UA or non-UA equipment;

strenuous activities, including things identified as "injury risks" herein;

• Remote/Online Programs, including but not limited to, the risk of data mining, phishing, viruses, malware, data breach of online information cyberbullying, exploitation, victimization, cyber stalking, online grooming, cyber predators, digital footprint, reputation loss, compliance violations, brand hijacking, image replication;

Health risks, such as allergic reactions, heart or respiratory events as well as other risks inherent in any

Other risks and hazards beyond the control of UA	, including
criminal acts that can result in serious injury or death.	
Unique risks potentially related to the Program including but not limited to:	
The Participant acknowledges that they have had an opportunity to investigate the Pr form and, knowing and understanding all risks associated with the Program VOLUNTARILY AGREES TO ASSUME AND ACCEPT ALL RISKS that potentially the Program. Participant also agrees to take all reasonable steps to avoid any risks, injurity	n, Participant nevertheless accompany participation in
Health Care and Emergencies	
Neither UA nor accepts responsibility or care services or health care insurance for Participant. Participant should consult his/her and warrants his/her physical fitness to participate in the Program. Participant to obtain any necessary medical treatments.	r own medical care provider, ipant authorizes UA and
Program. Participant agrees to be responsible for the payment of any fees and charges doctor or hospital facility in the provision of medical care to Participant. Further, Par and hold UA and harmless from any cla	ticipant agrees to indemnify
doctor of medical facility of said fees and charges incurred in the provision of medical Participant is required to provide the name(s) and contact number(s) for a parent, guarantee a reliable contact in the event of emergencies.	ical care to Participant. The
Conduct Participant agrees, for the duration of the Program, to abide by all applicable federal, so the rules and regulations for the Program. For virtual programs or activities, the parer agree to supervise the Participant at all times during the virtual components of the Program to follow posted signs as well as instructions and directions of University officials supervisory staff.	nt or guardian of Participant gram. Participant also agrees
Photography Participant acknowledges that photographs and possible videos may be taken and authorizes UA and	nges. Participant releases and nims related to the broadcast my right to inspect or approve

Definitions

The following terms have the stated meaning when used in this document:

• Applicable Law – the laws of the State of Alabama, without regard to conflicts of laws provisions. UA does not waive, but reserves, all immunities, including Article I, section 14, of the Alabama Constitution. Claims against the University must be made to the State Board of Adjustment. To the extent not barred by immunity, nor required to be filed before the Board of Adjustment, exclusive venue and jurisdiction of all disputes shall lie in the state and federal courts of Tuscaloosa County, Alabama.

- <u>Broadcast</u> to use, reuse, broadcast, publish and/or copyright, in whole or in part, for advertising, promotion, publicity, trade, educational, commercial, merchandising, packaging, public relations and media purposes, in all media, worldwide without limitation, in perpetuity.
- <u>Image</u> image, picture, name, biographical information, voice, statements, recordings or interviews made by or attributable to the person who is appearing in the work, verbatim or otherwise, photographic portraits, drawings, visual representations, video tapes, motions pictures, or other use of likeness in whole or in part, and any reproductions thereof.
- **Participant** the person participating in the Program or any University employee (regular or temporary), 3rd party employee, student, or volunteer working in any capacity to facilitate or support the Program. If the Participant is under age 19 or is under some form of court-ordered guardianship or custodial arrangement, permission and acknowledgement by a parent/guardian is required.
- <u>Potential Liabilities or Claims</u> any and all loss, injury, death, claims, actions, suits, proceedings, settlements, damages, costs, fees, and expenses, at law or equity, known and unknown, foreseen and unforeseen, including, but not limited to, attorney fees and costs of litigation, and liabilities arising out of, connected with, or resulting from the Participant's involvement in the Program, such as medical expenses, other costs, injury, sickness, or death. Additionally, potential claims related to the use of the Participant's image may refer to any liability, damages (compensatory or punitive), claims, or causes of action whatsoever, including, without limitation, claims for invasion of privacy, defamation of character or any alteration, distortion or illusionary effect, whether intentional or otherwise.
- <u>Program</u> _____ including all activities incidental or connected therewith, such as housing, dining, training, activities, and transportation. Programs may be held on or off University property and may require transit between two or more locations. The terms of this document will apply regardless of Program location, including to and from the event(s).
- <u>UA</u> The Board of Trustees of The University of Alabama (hereinafter referred to as "UA" or "University"), including The University of Alabama, affiliated foundations, and their respective trustees, officers, employees, agents, representatives and volunteers.
- Work the finished product and any material used in connection therewith.
 _____ ____ and their directors, trustees, officers, employees, agents, representatives, and volunteers.

Emergency Contact(s):	
Name:	Phone:
Name:	Phone:
DOCUMENT AND, RELYING WHOLLY UP RISKS ASSOCIATED WITH THE PROGRA VOLUNTARILY AGREE TO EXECUTE TH ACKNOWLEDGE THAT NO ORAL REPR BEEN MADE TO ME SEPARATE AND	THAT I HAVE READ AND UNDERSTAND THIS ENTIRE ON MY OWN JUDGMENT, BELIEF, AND KNOWLEDGE THE AM, WHICH INCLUDE SIGNIFICANT INJURY OR DEATH, IS DOCUMENT AND PARTICIPATE IN THE PROGRAM. I ESENTATIONS, STATEMENTS, OR INDUCEMENTS HAVE APART FROM THE TERMS OF THIS DOCUMENT. I OF MY OWN FREE WILL FULLY INTENDING TO LEGALLY AND ASSIGNS TO ITS TERMS.
Signature:	Date:
Printed Name:	Phone:
*If Participant is under the age of 19, a Parent	:/Guardian must execute this document.
AND UNDERSTANDS THIS DOCUMENT DEATH, ASSOCIATED WITH THE PROGRAP PART IN THE PROGRAM, HAS THE RIGHT THIS DOCUMENT VOLUNTARILY, ACSTATEMENTS, OR INDUCEMENTS HAVE THIS DOCUMENT, AND AGREES TO ENTER	EMENT CIFIES THAT THEY ARE OVER THE AGE OF 19, HAS READ T, UNDERSTANDS THE RISKS, INCLUDING INJURY OR AM, IS VOLUNTARILY ALLOWING PARTICIPANT TO TAKE IT TO SIGN ON BEHALF OF THE PARTICIPANT, IS SIGNING EKNOWLEDGES THAT NO ORAL REPRESENTATIONS, BEEN MADE SEPARATE AND APART FROM THE TERMS OF ER INTO THE SAME, FULLY INTENDING TO LEGALLY BIND ORS, AND ASSIGNS TO THE TERMS OF THIS DOCUMENT.
Parent/Guardian Signature:	Date:
Printed Name:	Relationship: