

Waiver of Liability, Assumption of Risk & Indemnity Agreement Facilities Use Waiver - Non-Athletic

Department	Name of Facility/Class		
staff, equipment and services of representative or assigns, do hereb Regents of the University of Californ any and all claims, including the personal injury, accidents, or illnesses	y release, waive, discharge, and cover nia, its directors, officers, employees, and	myself, my hei nant not to su agents from lia ss resu sing from, but	irs, personal ie The ability from ilting in not limited
carries with carries with it certain inh to avoid injuries. Name of Facility social events, community outreach, situations, environments, or activities or damage. The specific risks vary from a such as scratches, bruises, sprains,	University property, facilities, staff, equipmorement risks that cannot be eliminated regardly or Class has facilities for and provoletinics, classes, camps and day care. Sons that may lead to illness, physical injuries one activity to another, but the risks range and embarrassment 2) major injuries such chological trauma 3) catastrophic injuries	ardless of the orides activities me of these in s, and psychology from 1) minor ch as joint or b	care taken such as volve ogical stress injuries ack injuries,
other risks that are inherent in the	aragraphs and I know, understand, and activities made possible by Name n is voluntary and that I knowingly ass	of Facility or Clas	ss . I
University of California HARMLESS expenses, damages and liabilities, in	ss: I also agree to INDEMNIFY AND HOL from any and all claims, actions, suits, pr ncluding attorney's fees brought as a resu and to reimburse them for any such expe	ocedures, cos ult of my involv	ts, rement at
risks agreement is intended to be as	ner expressly agrees that the foregoing was broad and inclusive as is permitted by the reof is held invalid, it is agreed that the ba all force and effect.	ne law of the S	•
indemnity agreement, fully understa rights, including my right to sue.	ng: I have read this waiver of liability, assumed its terms, and understand that I am got acknowledge that I am signing the agreement to be a complete and uncondition w.	giving up sub ement freely a	stantial nd
Signature of Participant	Print Name of Participant	Date	Age (if Minor)
Signature of Parent/Guardian of Participant if Minor	Print Name of Parent/Guardian of Participant if Minor	Date	-