Fill out for Field Trips only:	
School:	UNIVERSITY OF CALIFORNIA
City:	Agriculture & Natural Resources
Date of Field Trip:	
Participant's Name(s):	

demnity Agreement

Waiver: In consideration for permission to use, today and on all future dates, the property, facilities, staff, equipment, classes, transportation, and services of the facility listed below ("The Facility"), I, for myself, heirs, personal representatives, and assigns, do hereby release, waive, discharge, and promise not to sue The Regents of the University of California, its directors, officers, employees, and agents ("The University"), from liability from any and all claims, including the negligence of The University, resulting in personal injury (including death), accidents or illnesses, and property loss, in connection with my use of The Facility and any associated use of University premises and facilities.

FACILITY: _____ _

DATE of event: _____

Assumption of Risks: Physical activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injury. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains, to 2) major injuries such as eye injury, joint or bone injuries, heart attacks, and concussions, to 3) catastrophic injuries such as paralysis and death.

Indemnification and Hold Harmless: I also agree to indemnify and hold The University harmless from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees, arising out of my use of The Facility, and to reimburse it for any such expenses incurred.

Severability: I further agree that this Waiver of Liability, Assumption of Risk, and Indemnity Agreement is intended to be as broad and inclusive as permitted by law, and that if any portion is held invalid the remaining portions will continue to have full legal force and effect.

Governing Law and Jurisdiction: This Agreement shall be governed by the laws of the State of California, and any disputes arising out of or in connection with this Agreement shall be under the exclusive jurisdiction of the Courts of the State of California.

Acknowledgment of Understanding: I have read this Waiver of Liability, 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 confirm that I am signing the agreement freely and voluntarily, and intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Parent/Guardian participant:

Signature of Parent/Guardian (Participant)

Date

Print name(s) of Child(ren)/ Family participants: