Participant's name:	
r arterpanes name.	Please Print
UNIVERSITY OF CA	ALIFORNIA RIVERSIDE
	gist Summer Camp
Waiver of Liability, Assumption of Risk, and Indemnity Agreement	
waiver of Liability, Assumption	1 of Risk, and Indemnity Agreement
Waiver: In consideration of being permitted to pa	participate in any way in
Including but not limited to: hiking outdoors, hand	ndling live insects, collecting and pinning insects
hereinafter called "The Activity", I, for myself, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and covenant not to sue The Regents of the University of 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 The Activity.	
Signature of Parent/Guardian of Minor Date	e Signature of Participant Date
Assumption of Risks: Participation in The Activity 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 to 3) catastrophic injuries including paralysis and death. I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in The Activity. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.	
the University of California HARMLESS from an	ney's fees brought as a result of my involvement in
Severability: The undersigned further expressly a risks agreement is intended to be as broad and incl California and that if any portion thereof is held in notwithstanding, continue in full legal force and et	nvalid, it is agreed that the balance shall,
Acknowledgment of Understanding: I have read indemnity agreement, fully understand its terms, a rights, including my right to sue. I acknowledge voluntarily, and intend by my signature to be a count to the greatest extent allowed by law.	and understand that I am giving up substantial

Date

Signature of Participant

Date Vol Waiver 7/01

Signature of Parent/Guardian of Minor

Participant's Age (if minor) _____