

Parental/legal Guardian Consent, Waiver and Indemnity

I, the undersigned Participant, wish to participate in the **Centennial Diving Summer Invitational** (“Event” or “Activity”) scheduled to take place on the campus of La Salle University on **June 1, 2019**. I understand that the Event is operated by **Centennial Aquatic Club/Centennial Diving** (“Licensee”) and that this Activity is neither administered nor sponsored by La Salle University (Releasees). In consideration of La Salle University’s permitting me to participate in the Activity, I agree as follows.

I fully recognize that certain risks are involved in participating in the Activity and in being transported to and from the campus and other incidental places, and I voluntarily assume those risks.

I will wear protective clothing and equipment as appropriate, follow directions of the employees and agents of Licensee or La Salle University and engage in the Activity in a prudent and cautious manner.

I will not consume any alcoholic beverages or non-therapeutic drugs prior to or while participating in the Activity.

I will not (i) act in any way which shall interfere with the lawful running or operation of the Activity or equipment used in connection with the Activity or (ii) engage in any type of conduct, which contributes to or causes injury to any person.

I am responsible for all of my own loss, liability and expenses, including medical expenses in connection with the Activity.

I have no physical, mental, psychological or medical condition that would prohibit me from participating or materially increase the risk to me or others of my participating in the Activity.

I have adequate insurance to cover any medical expenses for any injuries that may arise out of the Activity.

I hereby authorize the employees and agents of Licensee or La Salle University, at their discretion, to administer to or seek for me first aid and other emergency medical services and transportation for further medical care, but I acknowledge that they may not be present or may not elect or be able or competent to administer or seek such aid or services or transportation.

I recognize and understand that the minor child will be participating in activities which may expose the minor child to some level of risk of injury and that the minor child will be participating at his/her own risk. I agree to and hereby do release and hold harmless La Salle University and its trustees, agents, officers, servants, and employees (collectively, the “Releasees”) against loss (including reasonable attorneys’ fees) from any and all claims, or causes of action of any kind or nature that may be brought by or on behalf of the said minor child or by me arising out of any and all known or unknown, foreseen and unforeseen bodily or personal injuries, damages to property and consequences thereof which may be sustained by the said minor or by me arising out of or in connection with the Activity. Furthermore, I agree to indemnify La Salle University for any loss or damage to the premises, facility, or equipment caused by my minor child. Such indemnification shall include costs and expenses incurred by La Salle University, including reasonable attorneys’ fees.

I will not sue or seek damages from any of the Licensee in any form, and I hereby waive and release any and all claims against each of the Licensees for personal injury (including death) or property damage, arising in any way out of my participation in the Activity, even if the negligence of any of the Releasees or Licensee caused or contributed to such injury or damages and I agree to indemnify, defend and hold each Licensee harmless from any such claims. I recognize that this release means I am giving up, among other things, rights to sue the Licensee for injuries, damages or losses I may incur.

I have read and do understand the above statements and they are true and accurate.

Minor Participant’s Name (PRINT): _____

Parent/Legal Guardian’s Name (PRINT): _____

Parent/Legal Guardian’s Address and Phone Number (In Case of Emergency): _____

Parent/Legal Guardian’s Signature: _____

Date: _____