Participant's name:	

UNIVERSITY OF CALIFORNIA, RIVERSIDE

Waiver of Liability, Ass	<u>sumption</u>	of Risk, and Indemnity Agreemen	<u>1t</u>
Waiver: In consideration of being permit Riverside Excursion to the Ahmanson I, for myself, my heirs, personal represent covenant not to sue The Regents of the from liability from any and all claims it California, its officers, employees and (including death), and property loss arising	Theatre ntatives or University ncluding agents, re	to see Old Friends, hereinafter called assigns, do hereby release, waive, y of California, its officers, employed the negligence of The Regents of the sulting in personal injury, accidents	ed "The Activity," discharge, and ees, and agents he University of s or illnesses
Signature of Parent/Guardian of Minor	Date	Signature of Participant	Date
Assumption of Risks: Participation in T eliminated regardless of the care taken to another, but the risks range from 1) mind injuries such as eye injury or loss of sight catastrophic injuries including paralysis	o avoid inj or injuries it, joint or	juries. The specific risks vary from of such as scratches, bruises, and sprain back injuries, heart attacks, and con	one activity to ins 2) major
I have read the previous paragrother risks that are inherent in The Acthat I knowingly assume all such risks	tivity. I h	d I know, understand, and appreciency assert that my participation	
Indemnification and Hold Harmless: I University of California HARMLESS fro expenses, damages and liabilities, includ The Activity and to reimburse them for a	om any ar ling attorn	nd all claims, actions, suits, procedur ey's fees brought as a result of my is	res, costs,
Severability: The undersigned further exrisks agreement is intended to be as broat California and that if any portion thereof notwithstanding, continue in full legal for	d and incl	lusive as is permitted by the law of the valid, it is agreed that the balance shall be also be a second to the control of the	he State of
Acknowledgment of Understanding: I indemnity agreement, fully understand it rights, including my right to sue. I acknowledgment of the greatest extent allowed by law.	ts terms, a nowledge	nd understand that I am giving up that I am signing the agreement free	substantial ely and
Signature of Parent/Guardian of Minor	Date	Signature of Participant	Date

Participant's age (if minor)	
Email address	
Phone number	-
Will you be taking the bus to the Ahmanson Theatre, Ahmanson, or not at all?	
Do you have any accessibility concerns?	
If you are taking the bus to the Ahmanson, you will restrictions?	