



# UNIVERSITY OF MINNESOTA

## PARTICIPATION AGREEMENT AND COMPLETE WAIVER AND RELEASE

*University to complete:*

Event Name : University of Minnesota Women's Basketball

Department Conducting Event: Marketing

Name of Participant: \_\_\_\_\_  
(print)

Address: \_\_\_\_\_  
(street) (city) (state, zip)

Health Insurance Provider: \_\_\_\_\_

Group No/Name: \_\_\_\_\_ ID No. \_\_\_\_\_

Contact person in case of emergency:

Name: \_\_\_\_\_ Relation: \_\_\_\_\_  
(print) (print)

Phone: \_\_\_\_\_

### **THIS FORM MUST BE SIGNED WHERE INDICATED ON PAGE 2.**

I wish to participate in, or register my minor child or ward (hereinafter included in the words "I," "my," and "me") to participate in, the event set out above, including transportation to, during, and from that event, if offered (the "Event"). In consideration of such participation, I agree as follows:

**Risks.** I know the Event could result in risks of harm, including severe personal injury, disability, death, or property loss or damage ("Risks"). The University of Minnesota ("University") has no control over factors that may influence the Risks. I am experienced in the activities involved in the Event, and I have no medical condition or impairment, including the use of medication that might inhibit my active participation

**Release.** I voluntarily and knowingly accept full responsibility for encountering all Risks, known and unknown. On behalf of myself, my child, heirs, next of kin, successors, assigns, and anyone else who might claim through me, on my behalf, or who might have a claim arising out of, related to, or based upon any disability, death, or loss or damage to person or property I may experience as a result of the Event, I expressly forever release, indemnify and hold harmless the Regents of the University of Minnesota, regents, directors, employees, volunteers, leaders, sponsors, Event organizers, promoters, and

each of their agents, representatives, successors and assigns, and all other persons associated with the Event, ("Releasees") from any and all loss, cost, expense or other damage of any kind, including but not limited to insurance subrogation and attorney's fees (together and singly, "Claims"). **THIS RELEASE AND PROMISE APPLIES EVEN TO CLAIMS BASED IN WHOLE OR IN PART ON RELEASEES' NEGLIGENCE AND/OR GROSS NEGLIGENCE, TO THE EXTENT PERMITTED BY LAW.** The Event is voluntary, and not a part of, or related to, my educational program, residence, or employment at the University in any way.

**Emergency.** Event staff may render first aid and/or obtain medical treatment s/he deems necessary. I will be financially responsible for all costs incurred thereby, regardless insurance coverage. If I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring the hazard to the attention of the nearest official immediately.

5. **General.** I grant Releasees full permission to use images, recordings, or any other record of the Event in any medium. I will comply with stated and customary rules for participation. Event staff may terminate any participation due to conduct s/he deems inappropriate. The entry fee is non-refundable and non-transferable.

6. **Jurisdiction.** The laws of the State of Minnesota govern validity, construction and enforceability of this Agreement, without giving effect to its conflict of laws principles. All suits, actions, claims and causes of action relating thereto shall be in the State Courts in Hennepin County, Minnesota.

**I HAVE READ THIS LEGALLY BINDING DOCUMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND AGREE TO BE BOUND BY IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. THIS DOCUMENT MAY BE ELECTRONICALLY SIGNED BY CHECKING THE "I AGREE" BOX. A PHOTOCOPY OR FACSIMILE WILL BE AS VALID AS AN ORGINALLY SIGNED DOCUMENT.**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_  
(If participant is under the age of 18, Parent/Legal Guardian's signature)

Date: \_\_\_\_\_

I am the parent or legal guardian of \_\_\_\_\_  
(Print child's name)  
and am signing this release on behalf of the minor.