

Waiver of Claims and Release from Liability (Minor Student)

TO PARENTS/GUARDIANS PLEASE READ CAREFULLY

Please read this document carefully before signing. By signing this document, **you confirm that you are the parent and/or legal guardian of the minor student identified below** (the "Student") and as such, you are assuming risks on behalf of the Student which may have financial and other consequences for you and/or your family should you be injured or killed while participating in any of the activities described below.

By signing in the space provided at the bottom of this waiver, the parent/guardian acknowledges that the Student wishes to participate in one or more activities that are offered by the University as part of the curriculum or linked to research and other authorized activities, which are listed below:

1.
2.
3.

You acknowledge and agree that, in exchange for and as a condition of their participation in any of the activities listed above, they shall assume full responsibility for any damage to property which may be sustained in connection with his/her participation in any of the activities listed above.

You further acknowledge that:

- you are aware that participation in any of the activities listed above may be hazardous and could result in damage or injury including death;
- the Student is in satisfactory physical and mental condition to safely participate in the activities listed above;
- prior to the Student's participation in the activity or activities listed above, you will disclose to the Professor/Instructor and Department or Division Chair any allergy or other medical condition that may affect their ability to safely participate in the activities listed above;
- you have read and understand the terms of this document.

Accordingly, you hereby releases the Faculty, Nipissing University, its agents, employees and volunteers from all liabilities, claims, demands, actions and causes of action of any nature whatsoever arising from or related to any injury, including loss of life, that the Student may sustain, howsoever arising, including any damage, loss, theft or destruction of property, injury or death resulting from the negligence of Nipissing University, its agents, employees or volunteers, while attending at, participating in or travelling to or from any of the activities listed above.

Assumption of Risk: Despite the risks involved and as consideration for being allowed to participate in the activities listed above, **I agree to expressly assume any and all risk of injury or death** that might be associated with my participation in the activities listed above and use of the facilities at Nipissing University.

This document shall bind you and the Student's heirs, estate trustees, successors and assigns.

Parent or Legal Guardian Signature/Date

Parent or Legal Guardian Signature/Date

Signed on the _____ day of _____, _____.

Student's Name _____

Local Address _____

Student's Signature _____

Witness' Signature _____

Emergency Contacts

Name _____ Telephone Number _____

Name _____ Telephone Number _____