•			Please Print
UNIVERSITY	OF CALIFO	ORNIA, BERKELEY	
Waiver of Liability, Assu	ımption of R	isk, and Indemnity Agreemen	<u>.t</u>
Waiver: In consideration of being permit	tted to partici	pate in any way in the Universit	у
hereinafter called "The Activity", I, for my release, waive, discharge, and covenant officers, employees, and agents from liabi The Regents of the University of Californ personal injury, accidents or illnesses (incomparticipation in The Activity.	not to sue Tality from any rnia, its office	he Regents of the University of and all claims including the res, employees and agents, res	California, its negligence of ulting in
Signature of Parent/Guardian of Minor	Date	Signature of Participant	Date
eliminated regardless of the care taken to another, but the risks range from 1) minor injuries such as eye injury or loss of sight, catastrophic injuries including paralysis at I have read the previous paragra other risks that are inherent in The Acti that I knowingly assume all such risks.	injuries such joint or back nd death.	as scratches, bruises, and sprain injuries, heart attacks, and cond now, understand, and apprecia	ns 2) major cussions to 3)
Indemnification and Hold Harmless: the University of California HARMLESS expenses, damages and liabilities, including The Activity and to reimburse them for an	from any and ng attorney's	fees brought as a result of my ir	dures, costs,
<b>Severability:</b> The undersigned further exrisks agreement is intended to be as broad California and that if any portion thereof inotwithstanding, continue in full legal for	and inclusive s held invalid	e as is permitted by the law of the	ne State of
Acknowledgment of Understanding: I I indemnity agreement, fully understand its rights, including my right to sue. I acknowledgment of the greatest extent allowed by law.	terms, and <b>u</b> nowledge that	nderstand that I am giving up I am signing the agreement free	<b>substantial</b> ely and
Signature of Parent/Guardian of Minor	Date	Signature of Participant	Date

Participant's name:

	eement and fully understand its terms. I affirm that lage Community Garden, and further acknowledge at risks of the University Village Community II injuries or damages which may occur to me as a
I understand and agree to the Waiver of Liability, Assumption of Risk, and Indemnity Agreement:	Date:
Print Name:	
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Print Name:	
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Print Name:	
I understand and agree to the Waiver of Liability, Assumption of Risk, and Indemnity Agreement:	Date:
Print Name:	
I understand and agree to the Waiver of Liability,	

**GROUP WAIVER** 

Group Name:\_\_\_\_\_

Assumption of Risk, and Indemnity Agreement:

Date:

Print Name: