LIABILITY WAIVER AND RELEASE
TO BE SIGNED BY PARENT OR GUARDIAN OF MINOR PARTICIPANT

THIS IS AN IMPORTANT LEGAL DOCUMENT. DO NOT SIGN IT WITHOUT READING IT!

I, __________________________, the undersigned parent or guardian of the minor child named __________________________ ("My Child") hereby agree to the following terms and conditions, and make the indicated representations, in consideration of and as a condition of My Child's participation in the following identified program (the "Program"), which Program is being organized, produced, managed or permitted by The Curators of the University of Missouri (the "University") at the indicated location(s) (the "Location").

1. Representation of Authority/Grant of Permission: I represent to the University that I am the lawful parent or guardian of My Child and am authorized to agree to the following terms and conditions of this agreement both on behalf of My Child and myself. I represent to the University that I have familiarized myself with the schedule of events and activities for the Program and hereby grant permission for My Child to participate in the Program and all events and activities associated therewith unless indicated as “Excluded Activities” in the following box. (If none, indicate "None.")

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<th>Excluded Activities</th>
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2. Obligation to Follow Rules/Instructions: I understand and agree that: a) My Child must follow all published Program rules and the instructions of University representatives associated with the Program; b) if I participate in or am present with My Child at the Program, I must follow all published Program rules and the instructions of University representatives associated with the Program; b) if I am present with My Child at the Program, I shall ensure that My Child follows all published Program rules and the instructions of University representatives associated with the Program; and d) in the event that either I or My Child fails to obey those rules and instructions of the Program, the University can remove either or both of us from the Program.

3. Disabilities and Accommodations: Unless indicated as "Disability/Accommodation Need" in the following box, I certify to University that My Child does not have any medical conditions or disabilities of which the University should be aware while my child is participating in the Program. (If none, indicate "None.")

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<th>Disability/Accommodation Need</th>
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4. Release of Claims of My Child: I, on behalf of My Child, hereby waive, release, and forever discharge the University and its Curators, officers, employees, volunteers, representatives, successors and assigns (“Released Parties”) from and against any and all claims that My Child may have that arise out of My Child's participation in the Program and that seek to recover for any injury to or death of My Child, or for any damage, loss and expense suffered by My Child, due to the negligence or fault of the Released Parties.

5. Release of My Claims and Indemnity Agreement: I hereby waive, release, and forever discharge the Released Parties from and against any and all claims that I may have and that arise out of: a) My Child's participation in the Program and that seek to recover for any injury to or death of My Child, or for any damage, loss and expense suffered by My Child, due to the negligence or fault of the Released Parties; b) my being present at the Program and that seek to recover for any injury to or death of me, or for any damage, loss and expense suffered by me, due to the negligence or fault of the Released Parties. In addition to the foregoing, I agree to indemnify and hold harmless the Released Parties from and against any and all claims, damages, losses and expenses (including reasonable attorneys’ fees) that
arise out of my or My Child's participation in or attendance at the Program and that are claimed to be due to the negligence or fault of the Released Parties.

6. **Image/Media Release:** I understand that the University may have photographs and recordings taken of persons present at the Program. On behalf of myself and My Child I hereby: a) irrevocably grant permission to the University to make photographs, films, videos, reproductions, transcriptions and recordings (collectively, "Recordings") and to use, display, publicly perform, distribute, transmit, broadcast, publish, duplicate and post, through any type of media and in any form, including through and on the internet and websites, Recordings, whether in whole or part, of me and My Child while present at the Program, provided that such Recordings are not directly sold; and b) waive any right to inspect or approve Recordings prior to or after their use, display, public performance, distribution, transmission, broadcast, publication, duplication or posting. I understand that neither I nor My Child will receive monetary compensation in exchange for use of Recordings as stated in this agreement.

7. **Health and Safety Policy Guidelines:** Both before and during the Program, the University may make decisions as necessary to comply with health and safety laws, orders, regulations, ordinances and guidance pertaining to epidemic or pandemic level communicable diseases. These public health concerns may result in a disruption, alteration, or other modification to the Program schedule including, but not limited to, capacity restrictions, re-scheduling, shortening and relocating of activities, social distancing requirements and changes to format of Program presentations and events. The Program is subject to change as deemed necessary by the University to address public health concerns. I understand the risks associated with potential exposure to contagious infections and diseases, and I, on behalf of my child and myself, release University, its Curators, officers, employees, agents and authorized representatives from any and all claims related to the potential or actual exposure to contagious infections and diseases related to or arising from my child’s participation in the Program.

8. **Health Care and Emergencies:** I affirm my understanding that, by allowing me and My Child to participate in or attend the Program, the University is not responsible for providing health care services or health care insurance for either me or My Child. I certify that I will be responsible for the payment of any fees and charges that may be imposed by any doctor or medical facility for the provision of medical care for any injuries, illness or condition involving me or My Child during the Program. I agree to indemnify and hold the University harmless from any claim that may be made by a doctor of medical facility for such fees and charges.

9. **Travel Waiver:** I acknowledge that I am allowing my minor child (who is under 18 years of age) to attend an UMSL sponsored activity that is voluntary on his/her part and my child will be commuting independently to this activity via the Metrolink. Therefore, I assume any and all risks incident to the activity, including travel to or from such place of activity and acknowledge that UMSL and its staff/volunteers assume no liability, including financial responsibility for any or all injuries, loss, damages, or cost of any kind resulting from or occurring during my child’s independent travel via Metrolink to or from this activity, even if it is contended that any such injury was caused by the negligence on the part of fault by UMSL and/or its staff/volunteers.

10. **Acknowledgment:** I certify that: a) I am the parent or legal guardian of My Child; b), that I have read this document; c) I am relying wholly upon my own judgment about the risk of harm, injury or death to My Child due to My Child’s participation in the Program; d) I am over the age of 18; e) I am not signing this document based upon any oral representations, statements or inducements that have been made to me that are not stated in this document, and f) I am voluntarily signing this agreement as my own free act fully intending for me and My Child to be legally bound by it.