

Splash! At Cornell

A Learning Unlimited Program at Cornell University affiliated with the Public Service Center

Saturday, October 24, 2015

PARENTAL CONSENT and HOLD HARMLESS

I hereby give permission for my minor (son/daughter) _____ to participate in the Splash at Cornell sponsored program. I have reviewed the program details and itinerary and allow my (son'/daughter's) full participation in all program activities.

1. I agree, on behalf of myself, my (son/daughter), my heirs, my assigns, executors, and representatives, to defend, indemnify and hold harmless Cornell University, and its trustees, officers, agents and employees; and Splash at Cornell, from any and all liability, damage, claim of any nature whatsoever arising out of or in any way related to my (son's/daughter's) participation in this program including any act or omission of any third party (Rescue Squad, Hospital, etc...), except in the event of gross negligence or that negligence which is due solely, directly, and actively by Cornell University, its officers, or employees.
2. I am not aware of any medical conditions which would interfere with my (son's/daughter's) participation in the activities of this program. I understand that neither Cornell University nor Splash at Cornell provides any Accident or Medical Insurance for this program and that I am required to provide this for my (son/daughter). I agree that I am financially responsible for all such expenses whatsoever and where ever incurred.
3. I understand that all program participants are subject to Cornell University and Splash at Cornell policies and standards of conduct. In the event of violation of any of these, or behavior which is considered by Cornell University or Splash at Cornell providing this program to be detrimental to the University, students, or other participants, Cornell University and/or Splash at Cornell will have the right to dismiss my (son/daughter) from the program.
4. Based on the description of activities provided online at cornell.learningu.org and throughout registration, I have been informed about the dangers and risks inherent in my (son's/daughter's) participation in this program and agree to have (him/her) exercise caution when participating in the program. I further agree to have him/her immediately cease any activity that is perceived to be unsafe and to have him/her inform program staff of any safety concern. I also acknowledge that not every risk can be foreseen, and that this does not in any way limit the enforceability of this document.
5. I understand that program participants may be recorded on digital or film photography, videotape, audiotape, or any other medium. I agree that the program sponsor may use such images or sounds of my (son/daughter) for any lawful purpose, including but not limited publicity, illustration, advertising, and Web content. I waive any right to inspect or approve the copy and/or finished products that may be used in connection with this program.
6. I understand that if I desire my child to leave the program before it officially ends, I will have to arrange a meeting time and place with my child, and take full responsibility for meeting up with my child.
7. I will tell my child to check-in with the Splash! At Cornell helpdesk before he/she switches classes. I understand that if my child switches classes without notifying Splash! at Cornell administrators, Splash! at Cornell is not responsible for my child's whereabouts.
8. This document shall be governed by and construed under the laws of the State of New York. Any action or proceeding brought by any party to construe or enforce this document, or for damages for breach hereof, shall be brought in a court of competent jurisdiction located within the State of New York.
9. I state that I am of lawful age and legally competent to sign this Agreement, that the terms herein are contractual, and that I have signed this document as my own free act. I understand that as an adult, I am responsible for my daughter's conduct and safety. I have read and understand the terms of this Agreement and agree to all of its terms and conditions.

In witness whereof, this instrument is duly executed this _____ day of _____, 2015

Parent or Legal Guardian Name (Print)

Signature of Parent or Legal Guardian

Mailing Address

Phone Contact Number(s)