

## MINOR PARTICIPANT WAIVER AND NOTICE OF RISK

<b>Activity Title</b>	
<b>Activity Description</b>	
<b>Start &amp; End Dates</b>	
<b>Participant's Name</b>	
<b>Parent or Legal Guardian Name</b>	
<b>Parent or Legal Guardian Contact Information</b>  (Address and phone number)	
<b>Name of (and Contact Information for) Authorized Pick-Up</b>  (if authorizing an individual other than the parent/guardian)	

The University of New Mexico (“UNM”) welcomes you as a participant in this activity, including the use of UNM facilities and equipment. Please read through the following important information.

I exercise my own free and voluntary choice to participate in the designated activity, including use of facilities and equipment provided by UNM. **I understand and assume all associated risks of the designated activity. These risks include, but are not limited to**

Program Leader: Please include risks specific to the activity.

Knowing the above identified risks, and in consideration of being permitted to participate in the Program, I agree to assume all risk of personal injury or loss, bodily injury (including death), damage to or loss of, or destruction of any personal property resulting from or arising out of my child’s participation in the designated activity. I also release, waive, indemnify, hold harmless, and discharge UNM, its Board of Regents, its officers, employees or agents, from any and all claims, damages, and injuries arising out of my activities, including the use of equipment and facilities provided by UNM.

UNM does not provide health insurance for individuals participating in activities made available or sponsored by UNM. As such, you or your personal health insurance will be responsible for payment of medical services and care for any injuries sustained during the designated activity.

Participants in University activities are sometimes photographed and videotaped for use in UNM promotional, educational and research programs. Such audio, video, film and/or print images may be edited, duplicated, distributed, reproduced, broadcast, and/or reformatted in any form and manner without payment of fees. I authorize the use of the participant's image to be used in all forms and in all media for any lawful purpose.

I agree that this waiver and assumption of risk is intended to be as broad and inclusive as permitted by the State of New Mexico and that if any portion is held invalid, the remainder will continue in full legal force and effect.

I hereby certify that I have read and understand the provisions above and, as the parent or legal guardian of the participating minor, accept the above terms and grant permission for participation on behalf of the minor.

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Print Participant's Name	Date
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Print Parent/Legal Guardian's Name	Parent/Legal Guardian's Signature	Date
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Print Parent/Legal Guardian's Name	Parent/Legal Guardian's Signature	Date
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