Participant's	name:		Please Print
IMIVEDSITV	OE CALIEC	ORNIA, Berkeley	
	JS Sports Car	•	
	•	•	
waiver of Liability, Assu	<u>mpuon oi K</u>	isk, and Indemnity Agreement	
Waiver: In consideration of being permitt US Sports Camps activities	ted to particip	pate in any way in	
hereinafter called "The Activity", I, for my release, waive, discharge, and covenant officers, employees, and agents from liabil The Regents of the University of Califor personal injury, accidents or illnesses (incl to, participation in The Activity.	not to sue Th lity from any mia, its office	ne Regents of the University of Cal and all claims including the neg ers, employees and agents, resulti	ifornia, its ligence of ng in
Signature of Parent/Guardian of Minor	Date	Signature of Participant	Date
eliminated regardless of the care taken to a another, but the risks range from 1) minor injuries such as eye injury or loss of sight, catastrophic injuries including paralysis and I have read the previous paragra other risks that are inherent in The Activity that I knowingly assume all such risks.	injuries such joint or back ad death.	as scratches, bruises, and sprains injuries, heart attacks, and concust now, understand, and appreciate	2) major sions to 3)
Indemnification and Hold Harmless: the University of California HARMLESS expenses, damages and liabilities, includin The Activity and to reimburse them for an	from any and ag attorney's	fees brought as a result of my invo	es, costs,
Severability: The undersigned further exprisks agreement is intended to be as broad California and that if any portion thereof is notwithstanding, continue in full legal force	and inclusive s held invalid	e as is permitted by the law of the S	state of
Acknowledgment of Understanding: I had indemnity agreement, fully understand its rights, including my right to sue. I acknowledge to the greatest extent allowed by law.	terms, and u owledge that	nderstand that I am giving up sul I am signing the agreement freely	bstantial and

Signature of Parent/Guardian of Minor Signature of Participant Date Date

Participant's Age (if minor) _

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	greement, and understand that I am free to obtain advice from legal hese provisions. By signing below, I acknowledge that I have freely
SIGNATURE:	DATE:
PRINT NAME:	
ADDRESS:	
I hereby certify that I am over 18 years of age: For subjects under 18 years of age: I hereby certif do hereby give my consent without reservation to the	y that I am the parent or guardian of the person named above, and I
do hereby give my consent without reservation to th	e folegoing on benan of him of her.
SIGNATURE OF	DATE:
PRINT NAME:	
I have read and received a copy of this release:	Minor's Initials
Witnessed By:	
SIGNATURE:	DATE:
PRINT NAME:	