ROCHESTER INSTITUTE OF TECHNOLOGY RELEASE AGREEMENT CONCERNING MINOR CHILD

As the parent and/or legal guardian of	nester Institute of Technology ("	RIT"). As a precondition to the Participa	
1. Assumption of Risk. I understand that particle Activity Detail Form on the reverse side of this Reparties, such as transportation companies, park operepresented by RIT, and RIT is not liable for the number that the chance to ask questions concerning this Activity both the Participant and I are fully aware of the rist the Activity. I voluntarily assume full responsibility Participant sustain arising from the Participant's in officers, trustees, agents, employees or volunteers	elease Agreement. I acknowledge rators, family entertainment progregligent or otherwise wrongful at ty Detail Form and all such quests and hazards associated with the for any risks of loss, property the volvement in the Activity, unless that the second s	ge that some of the Activity may be provided oviders ("Providers"). These Providers a acts or omissions of these third party Prostions have been answered to my satisfact the Activity, and hereby consent to the Pay damage or personal injury, including de	ided by independent third are not agents of, or viders. I have been given tion. Having read this form, articipant's involvement in eath, that I and/or the
2. Liability Release. In consideration for RIT alloand release the Releasees from any and all liabiliti and/or the Participant may have arising out of any property belonging to me or the Participant, arising those claims arising from the gross negligence or very second to the property of the property belonging to me or the Participant, arising the gross negligence or very second to the property belonging to me or the property belonging to the propert	es, claims, demands, actions, ca loss, damage, or injury, including from the Activity or while upon	uses of actions, costs and expenses of any ng death, that may be sustained by me an on the premises where the Activity is bein	y nature whatsoever which I d/or the Participant, or to an
3. Indemnification. I agree to indemnify and hold and attorneys' fees, that Releasees may incur arisin negligence or wilful misconduct of the Releasees.			
4. Warranty of Physical Fitness. Both the Participarticipate fully in the Activity. We understand the ability of the Participant to participate in the Active medical insurance that covers the Participant for a medical expenses not covered by this insurance in the Active medical expenses and covered by this insurance in the Active medical expenses and covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses and covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses are covered by this insurance in the Active medical expenses are covered by the Active medical	he Releasees have not made, not rity, and Releasees are relying or ccidents and illnesses while part	r will make, any investigation into the Pa n my warranty concerning Participant's p cicipating in this Activity. I assume full r	rticipant's physical fitness o physical condition. I maintai
5. Emergency Medical Treatment. I grant the Rel appropriate, and agree that such action by the Rele assume no responsibility for any injury or damage	easees shall be subject to the terr	ms of this Agreement. I understand and a	agree that the Releasees
6. Talent Release. I grant to RIT the absolute and and display the name, likeness, features, voice, ide that neither I nor the Participant is entitled to any equotations or photographs whether used for illustrations.	entity, resemblance, quotations of compensation for the use of the	or photographs of Participant while engage Participant's name, likeness, features, vo	ged in the Activity. I agree
7. Loss or Damage to Property. I and the Participal Participant's personal property. I and the Participal property.	_	-	
It is my express intent that this Agreement shall be administrators, assigns or personal representatives construed in accordance with the laws of the State the forum for any lawsuits arising from the Activit of competent jurisdiction holds any term to be ille. In signing this Agreement, I acknowledge that I has terms. I further acknowledge that I am the parent	. I agree that this Agreement an of New York, without regard to try or incident to this Agreement. gal or unenforceable, the validity ave read both pages of this Release	and any claim arising from participation in the conflict of laws provision. The court is. The terms of this Agreement shall be set yof the remaining portions shall not be a case Agreement form, understand it, and a	the Activity shall be ts in Monroe County shall be everable, such that if a court affected thereby. Igree to be bound by its
Name of Parent or Guardian (printed)	Signature	Date	

Signature

Date

Name of Participant (printed)

ACTIVITY DETAIL FORM

Name of Activity:	Honors Pre-Orientation Activities
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Date(s) of Activity:	August 18, 2018 – August 21, 2018
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Location of Activity: RIT Campus and YMCA Camp Arrowhead

Description of Activity: Various orientation activities including but not limited to:

Name of Activity: Honors Pre-Orientation Trip to Camp Arrowhead

Date(s) of Activity: August 19, 2018

Location of Activity: Camp Arrowhead, 20 Arrowhead Road, Pittsford, NY

Description of Activity: Participants will be traveling to Camp Arrowhead and engaging in various activities including, but not limited to:

- Ropes courses: a challenging outdoor personal development and team building activity which usually consists of high and/or low elements
- Bow and arrow archery range
- Swimming

Name of Activity: Honors Pre-Orientation Outdoor Activities

Date(s) of Activity: August 18, 2018 – August 21, 2018

Location of Activity: Outdoors: Greek Lawn

Description of Activity: Participants will engage in various outdoor activities including, but not limited to;

- KanJam
- Ultimate Frisbee
- Soccer
- Football

I and the participant understand that participating in this activity can be dangerous involving many risks of injury, including but not limited to serious injury to bones, joints, ligaments, internal organs as well as the risk of death or serious disability. Any of these injuries may lead to a permanent impairment to engage in the business, social and recreational activities which the participant generally enjoy in life. Because of the dangers of participating in this activity, I and the participant warrant that we are knowledgeable in the use of protective equipment and rules of the activity, and agree to abide by such use of protective equipment and rules. In addition, travel can result in injury or death. The participant may become ill while participating in the Activity and require medical attention away from campus or home. The participant's personal effects or other property may become lost, stolen, or damaged by casualty. I am fully aware of the risks and hazards associated with the activity, and hereby elect to voluntarily participate in this activity.

In our effort to conduct a safe event, we request that you conduct your participation with the safety of yourself and others in mind.