## University of North Texas Unconditional and General Liability Release, Waiver, Indemnification and Agreement Not to Sue

## Faxed forms are no longer accepted. Forms must mailed with original signatures.

Tuxed forms are no	tonger accepted: 1	or ms mu	ast manea with original signatures.
1. I, the undersigned parent/legal	guardian of		, authorize said child's participation in
Mariachi Summer Camp ("CAM risk that are associated with and n	(P"), including all related may occur as a result of m I risks may result in prope	activities. y child's pa	I fully understand all of the dangers, hazards and articipation in the CAMP and related activities. I e, impairment to health and well being, and/or
risks. I further agree to release, v University of North Texas System Texas System, as well as officers Texas and the University of North liability, claims, demands, action damage, or injury, including deat OTHERWISE, that may be sustain or upon the premises where the Connection with the CAMP. I fur	vaive, and covenant not to n, the Board of Regents f , agents, employees and a h Texas System (referred s, causes of action, suits in h, WHETHER CAUSED ined by my child while pa CAMP and related activities ther agree to indemnify th ut of loss, damage or inju-	o sue the State or the University of the Univers	AMP, I agree to assume full responsibility for all ate of Texas, the University of North Texas, the versity of North Texas and the University of North is acting as employees of the University of North vely as "Releasees"), from and against any and all hatsoever arising out of or related to any loss, NEGLIGENCE OF THE RELEASEES OR in the CAMP or in any related activity or while in g conducted or while being transported to, from or in es from liability, claims, demands, actions, causes of urs as a result of my child's negligent or intentional ties.
3. I understand and agree that Releasees are granted permission to authorize medical treatment, if necessary, for my child and that such action by Releasees shall be subject to the terms of this Release, Waiver, Indemnification and Agreement not to Sue. I understand and agree that Releasees assume no responsibility for any injury or damage to my child or for any related cost which might arise out of or in connection with such authorized medical treatment, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. I understand that I am strongly urged to obtain adequate health insurance to pay any medical costs that may be attendant as a result of injury to my child.			
	amily and spouse, if I am		nd Agreement not to Sue shall bind myself, my my estate, family, heirs, administrators, personal
carefully read the document and	understand its contents and age and fully competent to	d that I sign to sign; and	ot to Sue, I acknowledge and represent that I have n as my own free act and deed. I further state that I d that I have executed this Release for full, adequate,
with the laws of the State of Texa	s. If any term or provision	n of this Re	ement not to Sue shall be interpreted in accordance elease shall be deemed to be illegal, unenforceable, s of the Release shall not be affected thereby.
PLEASE READ CAREFULLY BEFORE SIGNING			
Print Camper's Name:			
Parent/Guardian Signature:			Date:
I agree to the terms of this Release, v procedures in order to maintain my s			not to Sue and I agree to follow all instructions and