

**The University of Texas at San Antonio
Youth Protection Program
Release and Indemnification Agreement**

This form must be completed and returned to the UTSA contact below prior to the program start date.

Participant:

Camper's Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Description of Activity: _____

Location: _____

Dates: _____

I am the above named Participant, am eighteen years of age or older and am fully competent to sign this Agreement.

I acknowledge that the nature of the Activity or Trip may expose me to hazards or risks that may result in my illness, personal injury or death and I understand and appreciate the nature of such hazards and risks.

In consideration of being permitted to participate in the Activity or Trip, I hereby accept all risk to my health and of my injury or death that may result from such participation and I hereby release The University of Texas at San Antonio, its governing board, officers, employees and representatives from any and all liability to me, my personal representatives, estate, heirs, next of kin, and assigns for any and all claims and causes of action for loss of or damage to my property and for any and all illness or injury to my person, including my death, that may result from or occur during my participation in the Activity or Trip, whether caused by negligence of The University of Texas at San Antonio, its governing board, officers, employees, or representatives, or otherwise. I further agree to indemnify and hold harmless The University of Texas at San Antonio and its governing board, officers, employees, and representatives from liability for the injury or death of any person(s) and damage to property that may result from my negligence or intentional act or omission while participating in the described Activity or Trip.

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR MY INJURY OR DEATH OR DAMAGE TO MY PROPERTY THAT OCCURS WHILE PARTICIPATING IN THE DESCRIBED ACTIVITY OR TRIP AND IT OBLIGATES ME TO INDEMNIFY THE PARTIES NAMED FOR ANY LIABILITY FOR INJURY OR DEATH OF ANY PERSON AND DAMAGE TO PROPERTY CAUSED BY MY NEGLIGENCE OR INTENTIONAL ACT OR OMISSION.

SIGNATURE OF PARTICIPANT

DATE

PRINT NAME

PLEASE RETURN TO UTSA:

Name of Program: University of Texas at San Antonio NCA Cheer/Mascot Camp 2023

Contact: Debra Justice, Executive Director, Conference and Events Services

Contact Phone: (210) 458-4906

Contact email: debra.justice@utsa.edu

Contact Mailing Address: 501 W. César E. Chávez, San Antonio, TX 78207