

Youth Protection Program - Third-Party Group Release

Event/Program Name:	
Program Date(s):	Team Name:
Team Manager Name:	Manager Phone Number:
Participant under the age of 18) invo responsible party for the participants	I by each Participant (or the parent/guardian of any lved in the Program and designate the Team Manager as the indicated below. In consideration for the educational, its to be provided, the receipt and adequacy of which is follows.
Liability Release: THIS IS A R voluntarily waives, releases, exculpa	RELEASE OF LIABILITY. Participant knowingly and tes, and discharges UofL and
	against any and all Potential Liabilities connected with the articipant voluntarily agrees to discharge UofL, and any related third-party entities or
contractors in advance from all such	Potential Liabilities.
Indemnification: The Participar or arising from Participant's involved	nt agrees to hold harmless and indemnify UofL and from and against Potential Liabilities related to ment in the Program.
	icipant understands and acknowledges that there are risks, n all activities that can result in loss, damages, injury, or
	ecidents, crashes, and risks from autos operated by UofL or as well as autos operated by other individuals
or entities, poorly maintained serious injury or death;	l roads, sidewalks, as well as criminal acts that can result in
 Premises risks, including thosas drowning; 	se that may be owned by others and risks from water, such
 Injury risks from falls, collisi sprains, broken bones, concus 	ons, or accidents (such as cuts, bruises, torn muscles, ssion, etc.);
 Outdoor risks, such as weather 	er, lightning, heat or cold, insect bites/stings, allergic

reactions to plants, dehydration, hypothermia, drowning, sunburn, animals, and limited

access to medical care;

- Risks from others involved in the Program such as transmission or exposure to illnesses and communicable diseases (such as COVID-19) or other participants actions;
- Risks from communicable diseases that my unpredictably effect programming such as cancellations, delays, or transition to online platforms. There is no guarantee of reimbursement of fees if programming is affected.
- Health risks, such as allergic reactions, heart or respiratory events as well as other risks inherent in any strenuous activities, including things identified as "injury risks" herein;
- Equipment risks, including failure, misuse, inherent risks, and risks from UofL or non-UofL equipment;
- Unique risks potentially related to the Program listed on Addendum A.

The Participant acknowledges that they have had an opportunity to investigate the Program before executing this form and, knowing and understanding all risks associated with the Program, Participant nevertheless VOLUNTARILY AGREES TO ASSUME AND ACCEPT ALL RISKS that potentially accompany participation in the Program. Participant also agrees to take all reasonable steps to avoid any risks, injury, or death.

Health Care and Emergencies: Neither UofL nor
accepts responsibility or liability for providing health care services or
health care insurance for Participant. Participant should consult their own medical care provider
and warrants their physical fitness to participate in the Program. Participant authorizes UofL and
to obtain any necessary medical treatment
for Participant during the Program. Participant agrees to be responsible for the payment of any
fees and charges that may be imposed by any doctor or hospital facility in the provision of
medical care to Participant. Further, Participant agrees to indemnify and hold UofL and
harmless from any claim that may be made
by a doctor or medical facility of said fees and charges incurred in the provision of medical care
to Participant. The Participant is required to provide the name(s) and contact number(s) for a
parent, guardian, or other party that is a reliable contact in the event of emergencies.

Communicable Diseases: The protection against communicable diseases is a shared responsibility. The participant will follow the health and safety protocols of the University, CDC and recommendations from government. The health and safety protocols may include, but are not be limited to, wearing a facial covering and appropriate personal protective equipment (PPE), practicing appropriate physical distancing, cooperating with any changes made to the health and safety rules, appropriate quarantining or self-isolation, and adopting good hygiene practices and cleaning protocols.

Conduct: Participant agrees, for the duration of the Program, to abide by all applicable federal, state, and local laws as well as the rules and regulations for the Program. Participant also agrees to follow posted signs as well as instructions and directions of University officials and Program directors and Authorized Adults.

hotography: Participant acknowledges that photographs and possible videos may be taken
nd irrevocably and perpetually authorizes UofL and
broadcast these images. Participant releases and discharges UofL and
from any potential claims related to the broadcast or use of their
nage, and any potential claims related to the work. Participant waives any right to inspect or
pprove the work or the broadcast of their image.

This agreement shall be interpreted in accordance with applicable law. This is the entire agreement of the parties, and any changes must be in writing.

Definitions: The following terms have the stated meaning when used in this document:

- **Applicable Law** the laws of the State of Kentucky, without regard to conflicts of laws provisions.
- **Broadcast** to use, reuse, broadcast, publish and/or copyright, in whole or in part, for advertising, promotion, publicity, trade, educational, commercial, merchandising, packaging, public relations and media purposes, in all media, worldwide without limitation, in perpetuity.
- Image image, picture, name, biographical information, voice, statements, recordings or interviews made by or attributable to the person who is appearing in the work, verbatim or otherwise, photographic portraits, drawings, visual representations, video tapes, motions pictures, or other use of likeness in whole or in part, and any reproductions thereof.
- **Participant** the person participating in the Program minor or otherwise. If the Participant is under age 18 or is under some form of court-ordered guardianship or custodial arrangement, permission and acknowledgement by a parent/guardian is required.
- Potential Liabilities or Claims any and all loss, injury, death, claims, actions, suits, proceedings, settlements, damages, costs, fees, and expenses, at law or equity, known and unknown, foreseen and unforeseen, including, but not limited to, attorney fees and costs of litigation, and liabilities arising out of, connected with, or resulting from the Participant's involvement in the Program, such as medical expenses, other costs, injury, sickness, or death. Additionally, potential claims related to the use of the Participant's image may refer to any liability, damages (compensatory or punitive), claims, or causes of action whatsoever, including, without limitation, claims for invasion of privacy, defamation of character or any alteration, distortion or illusionary effect, whether intentional or otherwise.
- **Program** ______ including all activities incidental or connected therewith, such as housing, dining, training, activities, and transportation. Programs may be held on or off University property and may require transit between two or more locations. The terms of this document will apply regardless of Program location, including to and from the event(s).

• UofL – The Board of Trustees of The University of Louisville (hereinafter referred to as "UofL" or "University"), including The University of Louisville, affiliated foundations, and their respective trustees, officers, employees, agents, representatives and volunteers. • Work – the finished product and any material used in connection therewith. and their directors, trustees, officers, employees, agents, representatives, and volunteers. Acknowledgement: I, AS PARTICIPANT, OR PARENT OR GUARDIAN OF A MINOR PARTICIPANT, ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THIS ENTIRE DOCUMENT AND, RELYING WHOLLY UPON MY OWN JUDGMENT, BELIEF, AND KNOWLEDGE THE RISKS ASSOCIATED WITH THE PROGRAM, WHICH INCLUDE SIGNIFICANT INJURY OR DEATH, VOLUNTARILY AGREE TO EXECUTE THIS DOCUMENT AND PARTICIPATE IN THE PROGRAM AND DESIGNATE: Team Manager Name: AS RESPONSIBLE PARTY FOR THE PARTICIPANT FOR THE DURATION AND CAPACITY OF THE PROGRAM. I ACKNOWLEDGE THAT NO ORAL REPRESENTATIONS, STATEMENTS, OR INDUCEMENTS HAVE BEEN MADE TO ME SEPARATE AND APART FROM THE TERMS OF THIS DOCUMENT. I VOLUNTARILY SIGN THIS AGREEMENT OF MY OWN FREE WILL FULLY INTENDING TO LEGALLY BIND MYSELF, MY HEIRS, SUCCESSORS, AND ASSIGNS TO ITS TERMS. *If Participant is under the age of 18, the Parent or Guardian must execute this document. Participant Name: Parent Signature: Participant Name: Parent Signature: Participant Name: Parent Signature: Participant Name: _____ Parent Signature: _____ Participant Name: Parent Signature: Participant Name: _____ Parent Signature: _____ Participant Name: _____ Parent Signature: _____ Participant Name: Parent Signature: Participant Name: Parent Signature: Participant Name: _____ Parent Signature: _____ Participant Name: Parent Signature: _____ Participant Name: _____ Parent Signature: _____ Participant Name: Parent Signature:

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