

Texas Lutheran University
Agreement and Release Form



Bulldog Youth Event
October 20-21, 2018 Chapel of the Abiding Presence

IMPORTANT:

This form must be completed by the participant and parent/guardian and be on file with the Campus Ministry office in order to participate. Electronic signatures will NOT be accepted. After completing the entire form, please print, sign and send along with participant.

For questions or more information, please contact us at 830-372-8160 or dcasas@tlu.edu.

Participant Information (please print)

Name _____

D.O.B. _____

Sex: M F

Address _____

City _____ State _____ Zip _____

Congregation Name _____

Parent/Guardian Name _____

Day Phone _____ Evening Phone _____

Cell Phone _____

Emergency contact (if parents cannot be reached)

Name _____

Relationship _____

Day Phone _____ Evening Phone _____

Cell Phone _____

Please list any food allergies:

Event Attendee Rules

- Event participants will spend the night in the Chapel of the Abiding Presence (on campus) and are not allowed to leave the chapel unless accompanied by adult sponsors or official Texas Lutheran representatives. Any participant that leaves the Chapel (in accordance with the rules) must be accompanied by at least TWO adults.
- Possession or use of tobacco, alcohol, marijuana, chemicals, non-prescription drugs, or any other drug is prohibited.
- Valuable jewelry and sentimental items should be left at home. Texas Lutheran is not responsible for lost or missing items.
- Any damaging, altering, or removal of property will result in removal from the event and assessed charges will be the sole responsibility of the parent/guardian, including fees for setting off false alarms.
- Texas Lutheran reserves the right to protect event participants from others and him/herself and to maintain the integrity of the event. Therefore, if a participant is observed with, or found in possession of tobacco, alcohol, or drugs; exhibits inappropriate behavior; leaves the property; or is involved in any major disturbance (as determined by TLU event personnel), the parent/guardian will be contacted and the participant will be sent home immediately at parental expense without refund.
- Bills incurred by the participant for EMS, hospital visit, doctor's office visit, filling of prescription(s), etc. are the responsibility of the participant's parent/guardian.

Participant Signature _____ **Date** _____

(I agree to above Event Attendee Rules)

RELEASE AND WAIVER OF LIABILITY: I, on behalf of my child, myself, my and my child's personal representative, heirs, executors, administrators, agents, and assigns, HEREBY RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE Texas Lutheran University, including its governing board, trustees, directors, officers, employees, and any Participants, agents or volunteers acting at Texas Lutheran University's direction (collectively referred to as "Releasees"), for any and all liability, including any and all claims, demands, causes of action (known or unknown), suits, or judgments of any and every kind (including attorneys' fees), arising from any injury (which may include, but not limited to, cuts, bruises, sprains, strains, and broken bones), damage or death that I may suffer as a result of my participation in the Activity, UNLESS THE INJURY DAMAGE OR DEATH IS CAUSED SOLELY BY THE RELEASEES NEGLIGENCE FOR GROSS NEGLIGENCE OR INTENTIONAL MISCONDUCT.

Signature of Parent/Guardian for Participants Who Are Minors:

I certify that I have custody of Participant or am the legal guardian of Participant by court order. I HAVE READ THIS AGREEMENT AND FULLY UNDERSTAND AND AGREE TO ITS TERMS. I AM AWARE THAT THIS AGREEMENT INCLUDES A RELEASE AND WAIVER OF LIABILITY, AN ASSUMPTION OF RISK, AND AN AGREEMENT TO INDEMNIFY RELEASEES.

Parent Signature (if under 18) _____ Date _____