

WAIVER, RELEASE OF LIABILITY AND HOLD HARMLESS AGREEMENT MINOR PARTICIPANTS (for participants under 18)

I am the parent or legal guardian of [REDACTED] (“minor”) who has enrolled in **A Chinese Cooking Class on Saturday, November 11, 2017 from 2-5 pm** at Saint Louis University. In return for the Minor being accepted into a program being offered by **the Department of Nutrition and Dietetics** at Saint Louis University I:

1. Acknowledge that I understand the nature of the Program, and believe that Minor is qualified and in proper physical condition to participate in the Program. I further agree that if at any time, I or Minor believes conditions to be unsafe with respect to Minor’s physical condition, the equipment, or facilities, it shall be Minor’s responsibility to, and Minor will, immediately discontinue participation in the Program. This program involves field trips via shuttle and walking, both on and off the premises, in Grand Center and in the St. Louis Community.
2. Further acknowledge that the program involves the risk of serious bodily injury (including the possibility of permanent disability, paralysis, or death), which may be caused by (a) Minor’s own actions or inactions, (b) the actions or inactions of others participating in the Program, (c) the condition of the equipment and/or facilities at which the Program is located, or (d) the actions or inactions of the entities and persons identified below; and I fully accept and assume all such risk and all responsibility for losses, costs, and damages Minor may incur as a result of Minor’s participation in the Program.
3. Acknowledge that this is a Saint Louis University sponsored program and as such, all applicable University regulations, policies, procedures and consequences will apply during the Minor’s participation in this program.
4. Accordingly, I hereby release **Families With Children From China** and the **Division of Nutrition and Dietetics**, and **Saint Louis University**, a claim released in this agreement, I will indemnify and hold harmless each entity and person released herein from any and all litigation expenses, attorney fees, loss, ability, damage, or cost they may incur together with its directors, officers, employees, volunteers and agents from all liability, claims, demands, losses, or damages arising out of Minor’s participation in the Program; and I further agree that if, despite this release and waiver of liability agreement I, the Minor, or anyone on behalf of Minor or myself, makes a claim released in this agreement, I will indemnify and hold harmless each entity and person released herein from any and all litigation expenses, attorney fees, loss, ability, damage, or cost they may incur as the result of such claim.
5. I acknowledge that in an emergency, any Saint Louis University representative may transport or authorize the transportation of my child to a hospital/medical facility and I authorize any physician or other medical personnel to carry out any diagnostic procedures or emergency care deemed necessary. I understand that the cost of medical attention and ambulance are my responsibility.

6. Acknowledge that information about my child provided in this registration may be used by a Saint Louis University representative or any individual or organization identified by SLU as needed in order to effectively execute this program.
7. I acknowledge that a SLU representative may photograph or videotape my child while he/she is involved in the Program. These photographs or videotape will solely be used by SLU for the promotion and marketing of programs and activities and will not be sold. I understand that it is my responsibility to notify the **Division of Nutrition and Dietetics** in writing if I do not wish to have my child photographed or videotaped.

I have read this agreement, fully understand its terms, and have voluntarily entered into this agreement of my own free will based only upon the terms and conditions included herein.

Parent/Guardian Signature (REQUIRED)

Date _____

Prior to event, please sign and mail form to:

FCC – STL
PO Box 220373
St Louis, MO 63122