

Parental Consent and Legal Release for Minors

I give permission for my son/daughter to participate in the program described above. I, for myself, my heirs and legal representatives agree to release, indemnify and hold harmless Duquesne University and all of its officers, administrators, agents, and employees from any and all liability for any injury or loss and all claims, demands and actions at law or in equity that may hereafter at any time be brought by me, or anyone acting on my behalf, for the purpose of enforcing a claim for damages because of any injury (including death) or damage to me resulting from or in any way related to my child's participation in the aforesaid activity.

I understand that participating in this activity could result in physical and emotional injury, paralysis, death or damage to my child, to property or to others. I hereby acknowledge and agree that in the event of an injury to my child, I will apply my own medical, hospitalization and/or accident insurance toward the payment of any and all expenses incurred and will not look to Duquesne University for the payment of any medical or injury related expenses. I agree that my child may be transported to a local hospital to receive emergency medical treatment by that facility as determined by the Program Coordinator or other Supervising Adults or University personnel. I agree to disclose any form of allergies or other medical condition or physical limitation that might impact participation in the Program.

I HAVE READ THE ABOVE RELEASE AND HOLD HARMLESS AGREEMENT, I UNDERSTAND THE SAME, AND I AGREE TO BE LEGALLY BOUND BY ALL OF THE TERMS STATED THEREIN. *

Yes

Program Participant Emergency Contacts

Parent

First Name

Last Name

Cell Number

E-mail

Parent

First Name

Last Name

Cell Number

E-mail

Emergency Contact #1

Full Name

First Name

Last Name

Relationship to minor

Phone Number

Alt. Phone Number

Emergency Contact #2

Full Name

First Name

Last Name

Relationship to minor

Phone Number

Alt. Phone Number

Use of Image Consent and Release

I hereby give to Duquesne University of the Holy Spirit (Duquesne), along with its agents, employees, legal representatives, and assigns the right and license to use my daughter's/son's name, image, likeness, and comments in Duquesne materials for internal and external audiences. These materials include, but are not limited to advertisements, brochures, viewbooks, news releases, magazines, newspapers, newsletters, videos, websites, and social media. Participant's images may be used in all marketing, including university-wide communication for all audiences and across all Duquesne schools and programs. It is hereby stipulated and agreed that such production and use will not violate my child's rights, and I, for myself, my heirs, executors, administrators, and assigns, hereby release and discharge Duquesne and its agents and employees from any and all claims, demands, and/or causes of action of whatever kind, for its actions taken pursuant to the authority granted herein. Further, it is hereby stipulated and agreed that I will receive no compensation for the use of my daughter's/son's name, likeness, or comments, and Duquesne University will incur no liability for payment of compensation to me nor any person or organization as a result of its production and use thereof.

I HAVE READ THE ABOVE RELEASE AND HOLD HARMLESS AGREEMENT, I UNDERSTAND THE SAME, AND I AGREE TO BE LEGALLY BOUND BY ALL OF THE TERMS STATED THEREIN.

Yes

Camp Attending

Player Name

Player Age

Parent/Guardian Name

Parent/Guardian Signature