

World Affairs Council of the Desert

Release of Liability

Please submit one form for each student participating in Academic WorldQuest by **January 27, 2020**. Note that the **signature is necessary in two places**. Either scan and e-mail to Regina Garrison at rgarriso@csusb.edu or mail to 37500 Cook St., Palm Desert CA 92211.

Name: _____ High School: _____

Home Address: _____

I, and my heirs, in consideration of my participation in the **World Affairs Council of the Desert's Academic WorldQuest competition on February 4, 2020** on the Palm Desert Campus of California State University San Bernardino hereby release the World Affairs Council of the Desert, its officers, employees and agents, and any other people officially connected with this event, from any and all liability for damage to or loss of personal property, sickness or injury from whatever source, legal entanglements, imprisonment, death, or loss of money, which might occur while participating in this event. Specifically, I release said persons from any liability or responsibility for my condition. I understand that participation in this program is strictly voluntary and I freely chose to participate. I understand that the World Affairs Council of the Desert does not provide medical coverage for me. I verify that I will be responsible for any medical costs I incur as a result of my participation.

(Participant Signature)

(Date)

(Parent or guardian's signature if under 18)

(Date)

I understand that as part of my participation in the World Affairs Council of the Desert Academic WorldQuest competition I may appear in event photos or videotapes. In consideration of my appearance in the program and/or photo and without further consideration from the World Affairs Council of the Desert, I hereby grant the World Affairs Council of the Desert the right to utilize and authorize others to utilize the recording and/or photo in which I appear for television and internet broadcast, education cablecast, and all other manner and media world wide.

I agree that my participation in this program may be edited at the World Affairs Council of the Desert's sole discretion. I consent to the use of my name, likeness, voice and biographical materials for program publicity and related institutional promotional purposes. I expressly release the World Affairs Council of the Desert and its agents, employees, licensees and assigns from any and all claims which I have or may have arising out of my participation in the recording and/or photo session.

I affirm that I have read and fully understand the above.

(Participant signature)

(Date)

(Parent or guardian's signature if under 18)

(Date)