

RELEASE OF LIABILITY

I, (print student name) following agreement. In consideration of PAMC permitting r voluntary learning experience:	, enter into the me to participate in a
I, for myself, my heirs, administrators, executors, and covenant and agree that I will never institute, prosecute, or institution or prosecution of any demand, claim, or suit aga agents or employees, acting officially or otherwise, for a injury to my person or property which may occur from any a result of my participation in the activities at PAMC or g facility.	in any way aid in the linst PAMC and/or its ny loss, damage, or cause whatsoever as
If I should demand, claim, sue, or aid in any way such a d agree to indemnify PAMC all damages, expenses, and cos result thereof.	
I understand and agree that I may be held liable for any PAMC which is caused by my negligence, willful conduct, disl	_
I have read and fully understand the foregoing instrumes same by affixing my signature.	nt and agree to the
Participant Name (printed or typed) Date Signed Signature	
FOR THE MINOR PARTICIPANT (if applicable)	
I/We, as parent(s) or guardian(s) of the above named minor to his/her participating in the activities of PAMC: Agree to above agreement and adopt it as my/our own; and;	•
Agree to reimburse PAMC for any damage incurred by it would be liable were he/she 18 years of age.	for which this minor
Parent(s)/Guardian(s) (printed or typed)	Date Signed
Signature of Parent(s)/Guardian(s)	
(Both the participant <u>and</u> parent/guardian, if applicable, shal (Completed form will be maintained in Community Set	-