

ATTACHMENT D- RELEASE FOR THE UNIVERSITY OF OKLAHOMA (THIRD PARTY)

On this _____ day of _____, 20____, I certify that I am the Legal Representative of _____(Youth’s Name), hereinafter (“Youth”), of _____(Home Town), _____ (State), and I have full authority to and do give permission for Youth to participate in _____ (name of event), hereinafter (“the Event”), sponsored and hosted by _____ (event sponsor), to be held at the University of Oklahoma (“the University”)_____campus.

Notification. I understand and agree to notify the Event supervisor _____ at _____ immediately of any injuries Youth sustains as a result of the Event and of any inappropriate behavior the Youth experiences related to the Event. I also understand and agree that if any issues of sexual misconduct, harassment or assault occur, I will immediately report those to both the Event supervisor _____ at _____ and the University’s Sexual Misconduct Officer at 405-325-2215 or <https://www.ou.edu/eoo/reporting>. Initials _____

Release and Waiver. I, for and on behalf of the Youth, myself, my and Youth’s personal representatives, heirs, assigns and next-of-kin, hereby release, waive, forever discharge, indemnify and covenant not to sue the Board of Regents of the University of Oklahoma, its officers, members, employees, volunteers, agents and representatives for any and all loss, damages, claim, demand, action or right of action, arising from or by reason of any injury resulting or to result from participation in the Event. I, for and on behalf of the Youth, myself, my and Youth’s personal representatives, heirs, assigns and next-of-kin, agree to hold harmless, defend and indemnify, for any and all loss, damages, claim, demand, action or right of action, arising from or by reason of any injury resulting or to result from participation in the Event. This contains the entire agreement between the parties hereto and all terms are contractual and not a mere recital. I further state that Youth and I have each carefully read the foregoing Release and Acknowledgement as his/her own free and voluntary act. I am at least eighteen years of age and sign this Release and Waiver voluntarily.

_____/_____
Parent/Guardian Printed Name / Relationship

_____/_____
Signature / Date

Event or School/Squad Name (if applicable): _____

Address of Parent and/or Legal Guardian:

City _____ State _____ Zip _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email address: _____

Emergency Contact other than parent or guardian if they cannot be reached:

Contact _____

Phone _____

Any questions regarding this form should be directed to the Head Supervisor _____ at _____.