University of Northern Iowa Release and Authorization Form

Event: November 12, 2011 Hogwarts Academy – UNI Rod Library, in conjunction with The Cedar Falls and Waterloo Public Libraries, and in collaboration with UNI Department of Chemistry and Biochemistry

General Information			
Name		Age	Grade
Gender: □Female □Male		_	
Phone Number ()	E-mail		_
Address			
City/State		Zip/Posta	l Code
Name of Parents, Custodial Parent, or Le	egal Guardian*	•	
Home Phone	Work F	hone	
E-mail			
Additional Parent, Legal Guardian, or Ne.	xt of Kin*		
Home Phone	Work F	hone	
E-mail			
Persons allowed to pick up child from ever	ent*		
*Applies only to those under 18 years of	age.		
Emergency Notification			
Name	Rela	ationship	
Phone ()			
Address			
City/State		Zin/P	ostal Code
Name	Rela	Zip/i	
Phone ()	1 (010	200110111P	
Address			
City/State_		Zir	o/Postal Code
,			
Permission for Medical Treatment			
I, the undersigned parent, legal guardian, nex	t of kin, or applica	ant, hereby	authorize any necessary medical
treatment for this applicant/myself. I also guar			
treatment.			
Parent/Guardian			
Signature/Applicant**			Date
Photo Release			
In consideration of the right of the applicant to			
taking of photographs, videotapes, or other re			
University of Northern Iowa to use such photo			
education or promotion. I waive all right of private and private a	vacy in and to an	y said photo	graphs, videotapes, and recording
Parent/Guardian			_
Signature/Applicant**			Date
Activity Consent			
I specifically consent to the applicant's participation	oation in this ever	nt. I certify th	nat the applicant is in the necessar
physical condition to participate in any of the	approved activitie	e.g., invo	lvement in a competitive scavenge
hunt).		-	•
Parent/Guardian			
Signature/Applicant**			Date

Liability Release

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The undersigned parent, legal guardian, next of kin, or participant acknowledges that even though every effort is made to provide a safe, accident-free environment, incidents may occur. In consideration for being accepted by the University of Northern Iowa for participation in this event, I, being 18 years of age or older, do for myself (and on behalf of my child-participant, if said child is not 18 years of age or older) hereby agree to indemnify, release, defend, forever discharge, and hold harmless the University of Northern Iowa (UNI), University Book & Supply, the Waterloo and Cedar Falls Public Libraries, and their employees and agents [hereinafter, the "Releasees"], from any and all liability, claims, or demands for personal injury, sickness, or death, as well as property damage and expenses of any nature whatsoever which may be incurred by the undersigned and the childparticipant that occur while said child is participating in this event, whether such injury, sickness, death, damage, and/or expense is caused by my (or the child-participant's) negligence, the negligence of any of the Releasees, or the negligence of any third party. Furthermore, I (and on behalf of my child-participant, if under the age of 18 years) hereby assume all risk of personal injury, sickness, death, damage, and expense as a result of participation in this event and the activities involved therein. Further, authorization and permission is given to UNI to furnish any necessary transportation, food, and lodging for this participant. The undersigned further agrees to hold harmless and indemnify the Releasees for any liability sustained by any of the Releasees as the result of negligent, willful, or intentional acts of said participant, including expenses incurred attendant thereto. **Only applicant must sign if 18 years of age or older.

Parent/Guardian Signature/Applicant		
	Date	
Parent/Guardian Signature/Applicant*		
	Date	