

University of Texas Rio Grande Valley Release and Hold Harmless Agreement- Visitors

The University of Texas Rio Grande Valley		
Marine Science Boat Trip		
South Padre Island : Port Isabel		
	Initial	
I, am the <u>legal guardian</u> of the above named participant, am eighteen years of age or older and have voluntarily applied to participate in the above Activity or Trip.		
I am voluntarily participating in this Activity. I understand that there are risks associated with my participation in this Activity, such as physical and/or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability, death or economic loss. These injuries or outcomes may arise from my own or other's actions, inactions, or negligence, or the condition of the Activity location (s) or facility(ies).		
Nonetheless, I assume all risks of my participation in this Activity, whether known or unknown to me, including travel to and from the Activity (including air travel) or any events incidental to this Activity.		
ovide accident or health insurance, and I am personally lated to the specific activity.		
ate in this Activity, I release from liability and waive my right flunteers and agents from any and all claims, including claims y physical injury, illness (including death) or economic loss I icipation in this Activity, travel to and from the Activity I to this Activity.		
	Marine Science Boat Trip South Padre Island: Port Isabel articipant, am eighteen years of age or older and have Activity or Trip. I understand that there are risks associated with my and/or psychological injury, pain, suffering, illness, elity, death or economic loss. These injuries or outcomes may as, or negligence, or the condition of the Activity location (s) ation in this Activity, whether known or unknown to me, uding air travel) or any events incidental to this Activity. Activity action to health insurance, and I am personally lated to the specific activity. The activity of the activity and waive my right lunteers and agents from any and all claims, including claims y physical injury, illness (including death) or economic loss I activation in this Activity, travel to and from the Activity	

I sign this AGREEMENT voluntarily as my own free act and deed; no oral representations, statements, or inducement, apart from the foregoing written agreement, have been made.

Name (Participant)	Signature	Date
Instructor	Signature	Date
Shelby Bessette	Shelby Bessette	
UTRGV Representative	Signature	Date

Return original signed document to EHSRM, EEHS Bldg. Rm. 1001 Attn: Richard Costello.