



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

<b>PARTICIPANT:</b>	
<b>INSTITUTION:</b>	The University of Texas Rio Grande Valley
<b>DESCRIPTION OF ACTIVITY:</b>	Marine Science Boat Trip
<b>LOCATION</b>	South Padre Island : Port Isabel
<b>DATE(S)</b>	
<b>Description</b>	<b>Initial</b>
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.	
I acknowledge that the institution <u>does not provide accident or health insurance</u> , and I am personally responsible for the payment of any injuries related to the specific activity.	
In consideration for being allowed to participate in this Activity, I release from liability and waive my right to sue UTRGV , their employees, officers, volunteers and agents from any and all claims, including claims of the Institution's negligence, resulting in any physical injury, illness (including death) or economic loss I may suffer or which may result from my participation in this Activity, travel to and from the Activity (including air travel), or any events incidental to this 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 Shelby Bessette	Signature <i>Shelby Bessette</i>	Date
UTRGV Representative	Signature	Date

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