



SCIENCE OLYMPIAD AT THE UNIVERSITY OF PENNSYLVANIA
2018 Invitational Tournament
Release and Waiver of Liability Agreement

This Release and Waiver of Liability Agreement (the “Agreement”) executed on this ____ day of _____ 2018, by _____ (“Delegate”) in favor of the Trustees of the University of Pennsylvania (“Penn”), and Science Olympiad at the University of Pennsylvania and the University of Pennsylvania Science Olympiad Invitational being held on Saturday, February 17, 2018 (the “Invitational”).

In consideration of attending and participating in the Invitational, Delegate understands and hereby freely, voluntarily, and without duress executes this agreement under the following terms:

Release and Waiver. Delegate, for myself, executors and administrators, do hereby and forever waive and release Penn, its trustees, officers, agents, employees, and students from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Delegate’s attendance, participation and/or activities at the Invitational. Delegate understands that this Agreement discharges Penn and all associated parties with respect to any bodily injury, personal injury, illness, death, or property damage that may result from Delegate’s attendance, participation or activities at the Invitational or traveling to or from such event, whether causes by the negligence or omission of Penn or its officers, directors, employees, students, or agents, or otherwise. Delegate also understands and agrees that neither Penn and all associated parties assume any responsibility for or obligation to provide Delegate with any financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness.

Medical Treatment. Delegate hereby and forever discharges Penn and all associated parties from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Delegate’s attendance, participation or activities at the Invitational, or on Penn’s campus for such event or from traveling to or from the Invitational.

Insurance. Delegate understands that, except as otherwise agreed to by Penn, neither it nor any associated party carries or maintains health, medical, or disability insurance covering any delegate to the Invitational. Each such delegate is expected to have his or her own medical or health insurance coverage.

Other. Delegate expressly agrees that this Agreement is intended to be as broad and inclusive as permitted by the laws of the Commonwealth of Pennsylvania and that this Agreement shall be governed by and interpreted in accordance with the laws of the Commonwealth of Pennsylvania. Delegate agrees that in the event that any clause or provision of this Agreement shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Agreement which shall continue to be enforced.

IN WITNESS WHEREOF, Delegate has executed this Agreement as of the day and year first above written.

Delegate Name (Please Print): _____ **Birth Year:** _____

Delegate Signature: _____ **Date:** _____

Guardian Name (if Delegate is under 18) (Please Print): _____

Guardian Signature: _____ **Date:** _____

Address: _____ **Phone (H):** _____

_____ **Phone (C):** _____

In case of emergency, please contact:

Name: _____ **Relation:** _____ **Phone #:** _____

Primary Care Physician: _____ **Phone #:** _____