



University  
of Windsor

## ACTIVITY WAIVER FORM

### Honour Jazz Ensemble

Please circle the semester: Fall / Winter ; and write in the year student is registering: \_\_\_\_\_

1. This Waiver covers my child's participation in any one or more activities lessons, sectionals, master class, rehearsal time, and performance (herein referred to as the "Activity").
2. Participation in any of the above listed activities may involve risks, dangers and hazards. I am aware that by allowing my child to participate in any of the above activities he/she may be exposed to risk, personal injury or damage to property. I accept and assume those risks.
3. I, the undersigned, assume full and complete responsibility for any injury or accident that may occur to my child during this time at the University of Windsor. I hereby release and hold harmless the University of Windsor, their respective employees Officer and Directors, and all sponsors, persons, and entities from liability for injuries, loss and damages sustained to me, whether caused by negligence of the sponsors, other persons, or entities associated with this field trip, or otherwise.
4. I understand the activities will be supervised by faculty and/or staff of the University and I will comply with their instructions and directions during the activities.
5. I acknowledge that pictures and/or video may be taken of the activities and used for promoting University programs.
6. I acknowledge that I am responsible for the safekeeping of my child's personal property. The University of Windsor, their employees and directors, and all sponsors, persons, and entities associated with the University of Windsor are not responsible for loss or damage to personal items.

I ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREED to the above RELEASE, WAIVER AND INDEMNITY. I WARRANT that my child has my approval to take part in these activities.

NAME OF STUDENT: \_\_\_\_\_

NAME OF PARENT/GUARIDAN: \_\_\_\_\_

SIGNATURE OF PARENT/GUARDIAN: \_\_\_\_\_

DATE: \_\_\_\_\_