

**Texas Tech University Health Sciences Center El Paso**  
**Release, Hold Harmless and Indemnification Agreement**

**PARTICIPANT:** (Name and Address)

\_\_\_\_\_  
\_\_\_\_\_

**INSTITUTION:**

Texas Tech University Health Sciences Center El Paso

**DESCRIPTION OF ACTIVITY:** \_\_\_\_\_

**LOCATION:** \_\_\_\_\_ **DATE(s):** \_\_\_\_\_

I, \_\_\_\_\_, request voluntary participation for myself and/or minor child to participate in the above-referenced Activity sponsored by Texas Tech University Health Sciences Center El Paso and \_\_\_\_\_.

In consideration of myself and/or minor child's participation in the Activity, I hereby accept all risk to myself and/or minor child's health and of myself and/or minor child's injury or death that may result from such participation.

**I hereby release the above named Institution, the TEXAS TECH UNIVERSITY SYSTEM, its Board Of Regent, its officers, employees and representatives, in their individual and official capacities, from any liability to me, my personal representatives, estate, heirs, next of kin, and assigns for any and all claims and causes of action for loss of or damage to my and/or minor child's property and for any and all illness or injury to my person and/or minor child, including my and/or minor child's death, that may result from or occur during my and/or minor child's participation in the Activity, WHETHER CAUSED BY NEGLIGENCE OF THE INSTITUTION, ITS BOARD OF REGENTS, OFFICERS, EMPLOYEES, OR REPRESENTATIVES, OR OTHERWISE.**

I further agree to indemnify and hold harmless the above-named Institution, the TEXAS TECH UNIVERSITY SYSTEM, ITS BOARD OF REGENTS, its officers, employees, and representatives, in their individual and official capacities, from liability for the injury or death of any person(s) and damage to property that may result from my and/or minor child's negligent or intentional act or omission while participating in the described Activity.

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR MY AND/OR MINOR CHILD'S INJURY OR DEATH OR DAMAGE TO MY AND/OR MINOR CHILD'S PROPERTY THAT OCCURS WHILE PARTICIPATING IN THE DESCRIBED ACTIVITY AND IT OBLIGATES ME TO INDEMNIFY THE PARTIES NAMED FOR ANY LIABILITY FOR INJURY OR DEATH OF ANY PERSON AND DAMAGE TO PROPERTY CAUSED BY MY AND/OR MINOR CHILD'S NEGLIGENT OR INTENTIONAL ACT OR OMISSION. This Agreement shall be construed under the laws of the State of Texas and venue shall be in the state or federal courts of El Paso County.

I certify that I as Participant am either over the age of 18, or am the Parent or Guardian of Participant over the age of 18, and have knowingly and voluntarily signed this Agreement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness' Signature

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Print or type Name

\_\_\_\_\_  
Relationship to Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date