HackSI

Assumption of Risk, Release of Liability, Photo Release And Consent to Medical Attention

Participation in the HackSI sponsored event (referred to as Activity) enables you to participate in the Hack SI Hackathon to be held November 7 and 8, 2015.

A hackathon (also known as a hack day, hackfest or codefest) is an event in which computer programmers and others involved in software development, including graphic designers, interface designers and project managers, collaborate intensively on software projects. Occasionally, there is a hardware component as well. Some hackathons are intended simply for educational or social purposes, although in many cases the goal is to create usable software. Hackathons tend to have a specific focus, which can be the programming language used, the operating system, an application, an API, the subject and the demographic group of the programmers. In other cases, there is no restriction on the type of software being created. More information is available on our website: http://hacksi.me/.

Participation in this Activity will be held at the Dunn-Richmond Economic Development Center, 1740 Innovation Drive, Carbondale, Illinois 62903. The activity will take place in this building within SIU Research Park at Southern Illinois University Carbondale. No special supervision provisions will be provided by the venue or host.

Examples of the potential dangers and risks associated with the activity include, but are not limited to, the following:

- Exposure to risks normally found in public places
- The potential for injury as a result of criminal, negligent, or injurious acts of others
- Injury resulting in serious, permanent physical injury, or even death, resulting from accident, natural disasters or acts of God; from strikes, protest, riot, etc. or from medical care or treatment received incident to such injury.

These examples are not intended to be all inclusive but merely to exhibit awareness of the risks inherent in participation in and/or transportation associated with the Activity.

I agree to assume any and all risks related to my participation in the activity with HackSI.

- I hereby release HackSI, its organizers, sponsors and Southern Illinois University, as the venue provider, from any and all liabilities, claims or demands for damages for personal injury, disability, property damage or other loss of any kind that I may sustain as a result of or incidental to participating in the Activity.
- I further agree to indemnify and hold harmless HackSI, its organizers, volunteers, sponsors and Southern Illinois University as the venue provider from any and all liability, damages, or costs that it or they may incur as a result of my participation in the Activity or arising from any of my acts or omissions.
- I understand that HackSI, its organizers, volunteers, and Southern Illinois University, as the venue provider, are authorized (but are not obligated) to take any actions they consider to be warranted under the circumstances regarding my health and safety while participating in the Activity.
- I further agree to grant permission to HackSI to make, use, copyright and publish news stories, still photographs and/or video or audio recordings. I grant the right and permission to use the material, including reproduction in publicity releases, slide productions, Web site, publications, television productions or any other media.

ASSUMPTION OF RISK, RELEASE OF LIABILITY AND CONSENT TO MEDICAL ATTENTION

HackSI Participant's Name:	Age:
I have read this waiver, release of liability, pho and I am signing it voluntarily.	to release, consent, and HackSI Code of Conduct
Participant's Signature:	Date:
If HackSI participant is under 18, a parent/gua	ardian signature is required.
Parent/Guardian Name:	Relationship:
	to release, consent, and HackSI Code of Conduct on for my child to be treated by the appropriate medical tivity.
Parent/Guardian's Signature:	Date:
Emergency Contact Information A contact phone number where individual(s) can provided, in case of emergency.	be reached, regardless of the time of day must be
Name:	
Telephone number that I can be reached at includ	
Address:	
City, State, Zip	
E-mail Address:	
Please indicate any special medical problems (me	dicine, injury, allergies) of which we should be aware:
This form must be returned to the HackSI organiz	ers prior to participating in the HackSI activity.
If completing in-person, please provide complete	d and signed document to the registration desk.