



HACK(H)ER 413



Hack(H)er413 Accident Waiver and Release of Liability

I hereby assume all of the risks of attending and participating in Hack(H)er413 at the University of Massachusetts Amherst (University) including but not limited to any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault. I certify that there are no health-related reasons I cannot safely participate in this event. I acknowledge that this Accident Waiver and Release of Liability includes the release of the event holders, partners, sponsors and organizers of Hack(H)er413. I therefore agree, in consideration of and return for the services, facilities, and other assistance provided to me by the University in this activity, to RELEASE the University (and its Board of Trustees, officers, employees, and agents) from any and all liability, claims and actions that may arise from injury or harm to me, from my death or from damage to my property in connection with my participation in this activity. I understand that this RELEASE covers liability, claims and actions caused entirely or in part by any acts or failures to act of the University (or its Trustees, employees, or agents), including but not limited to negligence, mistake, or failure to supervise by the University. I agree that I will indemnify and hold harmless University, its officers, partners, organizers, and sponsors from and against all claims of any nature including all costs, expenses and attorneys' fees which in any manner result from my actions during this event. I recognize that this RELEASE means I am giving up, among other things, rights to sue the University, its Trustees, employees, and agents for injuries, damages, or losses I may incur. I also understand that this RELEASE binds my heirs, executors, administrators, and assigns, as well as myself. Further, I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident or illness during this event. This release, indemnification and waiver shall be construed broadly to provide release, indemnification, and waiver to the maximum extent allowed by law. I affirm that I am at least 18 years of age and have read this entire RELEASE; I fully understand it and I agree to be legally bound by it.

THIS IS A RELEASE OF YOUR RIGHTS. READ CAREFULLY BEFORE AGREEING.

For Releasers under 18, you must return a copy of this liability release signed by a parent or legal guardian. The liability release form will be sent to you after you have completed this application.