## Center for Sensorimotor Neural Engineering Research Experience for Undergraduates/Veterans Program Participant Agreement and Waiver

Joe Lawler has registered to participate in the	e Research Experience for
Undergraduates/Veterans Program sponsored by the University of Washington Center for	
Sensorimotor Neural Engineering on June 13, 2017 throu	igh August 18, 2017.
event, and that s/he assumes such risks. Joe with or without reasonable accommodation, of undertaking	ng this event.
Joe Lawler agrees not to claim against the U	niversity of Washington for injury,
damages, or losses other than those arising from the negli	igent acts or omissions of the University
of Washington, its employees, students and agents acting	in the course and scope of the
University-imposed duties. If Joe Caule is i	injured, s/he consents to emergency
medical treatment at his/her expense.	
An Jula	6/7/18
Participant's Signature	Date
(Or Guardian's, If Under 18)	
Emergency Contact (optional)	
Emergency Contact (optional)	
425-417-0505	
Contact's Phone Number	

{NOTE: Each participant should sign a copy of the form – attaching wording to a list is less legally binding}