

Waiver of Liability

Instructions: Please fill out the form in pen and use BLOCK letters. Kindly make sure that writing is legible.

This form must be signed by each and every Psifi IX participant. Otherwise registration will be cancelled. Return this form by mail along with the other documents required. Failure to have all of the necessary signatures will prevent you from receiving any materials at Psifi IX.

I, Undersigned from_____ (Institution name),

Attending Psifi IX at LUMS, Lahore from 13th of January to 16th of January, hereby agree to indemnify and hold harmless LUMS and Psifi employees and agents, from and against any and all claims, liability, lost, cost or obligations including without limitation reasonable attorneys* fees and expenses which may arise out of traveling to, participating in, and/or returning from Psifi IX at LUMS, Lahore.

In addition, I understand and will adhere to public law and realize that I'm personally responsible for all charges and damages to the event facilities and/or LUMS campus and/or the space allotted to me at the dormitories.

Delegate Name: _____

Date of Birth (dd/mm/yy): _____

Delegate Signature: _____ Date(dd/mm/yy): _____

(If under the age of 18 at 1st December, 2017 a parent or a guardian must sign the form) Name of Parent/Guardian: _____

Signature of Parent/Guardian (if applicable): _____

