



PENNGEMS PROGRAM 2024

JUNE 24-JUNE 28, 2024

SCHOOL OF ENGINEERING AND APPLIED SCIENCE

UNIVERSITY OF PENNSYLVANIA

WAIVER AND RELEASE FORM

(PLEASE READ CAREFULLY)

In consideration for allowing my child to participate in the *PennGEMS program*, the sufficiency of which I hereby acknowledge, I voluntarily agree to assume any and all risks of personal or bodily injury or property damage which might result from my child's participation and involvement in this program including any risks of travel to and from project locations off campus. I understand that participation in the program involves certain risks, including risk of serious injury, illness or economic loss.

I acknowledge and agree that my child's participation in this program is completely voluntary.

I understand that I am solely responsible for my child's safety. Further, I agree to remise, release and forever discharge the Trustees of the University of Pennsylvania, its successors, assigns, agents, officers, employees and students from and against all claims, demands, losses or damages of whatever kind that may result from my child's participation in the program. I also agree that the University is not responsible for obtaining any health, accident, disability, or any form of insurance that may be required.

I further grant the University of Pennsylvania the right to take, copyright and use, re-use, publish and republish (both in printed form and electronically) photographs of my child participating in *PennGEMS*. I understand that participants will not be identified by name in such photographs without further explicit permission in writing.

I have read and understand the terms of this Waiver and Release and, by my signature below, affirm that I am signing this waiver and release voluntarily.

Participant Name

Parent/Legal Guardian Name

Participant Signature

Parent/Legal Guardian Signature

Date Signed

Date Signed