

2018 AGREEMENT TO PARTICIPATE

I wish to participate in the **CGGC Bible Quizzing in July 2018**. I acknowledge that I am in good health and good physical condition. I understand that there are risks inherent in any physical activity. I assume the risks and accept the consequences involved in my participation in this event. I understand that if I am injured, I am responsible for my health care costs and I agree to release The University of Findlay, its Board of Trustees, officers, agents, employees, volunteers, or students from any and all claims for injury or illness resulting from my participation in this event. I also understand that the rules and regulations that govern student conduct will be in effect during this event.

I hereby grant UF the absolute and irrevocable right and permission, with respect to photographs and videos taken of me and/or comments made by me or in which I may be included with others, to copyright for same; to use, reuse and publish the same in whole or in part in any and all media including use on the world wide web, now or hereafter, and for any purpose whatever for illustration, promotion, art, advertising and trade, and if appropriate, to use my name and pertinent education and/or biographical facts as UF chooses.

Participant's Name (printed) _____

In the event of illness or injury of my child and reasonable attempts to contact me at my telephone:

Home: _____ Business/Emergency: _____

have been unsuccessful, I hereby give my consent to have any treatment deemed necessary by a local licensed physician or dentist and the transfer of the child to Blanchard Valley Hospital, if necessary.

Facts concerning the participant's medical history, including allergies, medications being taken, and physical impairments to which a physician should be alerted:

Parent or Guardian's Name (printed) _____

Address _____

Parent or Guardian's Signature _____

Date _____

If additional copies are needed, please copy on white paper only.