UCSC EXTENSION SILICON VALLEY

BERKELEY • DAVIS • IRVINE • LOS ANGELES • MERCED • RIVERSIDE • SAN DIEGO • SAN FRANCISCO SANTA BARBARA • SANTA CRUZ

2505 AUGUSTINE DRIVE, SUITE 100
SANTA CLARA, CA 95054
(408) 861-3700

Release Agreement for Enrollment by a Minor Child into a course administered by UCSC Extension

Course Name _____ Date(s) _____

I understand that University Policy prohibits minors from being on University Property unattended. Knowing this, and in consideration of permitting my minor child to attend courses administered by UCSC Extension, I hereby voluntarily release The Regents of the University of California from any and all liability resulting from or arising out of his/her presence on University property.

I understand and agree that I am releasing not only the entities set forth in the paragraph above, but also officers, agents and employees of those entities, and that I expressly waive all rights under Section 1542 of the Civil Code, which states that "a general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor."

I understand and agree that this Release will have the effect of releasing, discharging, waiving and forever relinquishing any and all actions or causes of action that I may have or have had, whether past, present or future, whether known or unknown, and whether anticipated or unanticipated by me, arising out of my child's participation in courses administered by UCSC Extension, except for the acts of omissions of The Regents of the University of California, its officers, agents or employees, which are found to be negligent by a court of competent jurisdiction.

I understand and agree that this Release applies to personal injury, property damage or wrongful death which s/he may suffer, even if caused by the acts or omissions of others.

I understand and agree that by signing this Release, I am assuming full responsibility for any and all risks of death or personal injury or property damage suffered by my child while participating in courses administered by UCSC Extension. I understand and agree that this Release will be binding on me, my spouse, my heirs, my personal representatives, my assigns, my children and any guardian ad litem for said children.

I understand and agree that by signing this Release, I am agreeing to release, indemnify and hold The Regents of the University of California and their officers, agents and employees harmless from any and all liability or costs, including attorney's fees, associated with or arising from my child's participation in courses administered by UCSC Extension.

If I am signing this Release on behalf of my minor child, I understand and agree that I will be giving up the same rights for said minors as I would be giving up if I signed this document on my own behalf.

I acknowledge that I have read this Release Agreement and that I understand the words and language in it.

MINOR STUDENT

Printed Name _____

Signature _____

Witness _____

Date _____

PARENT/GUARDIAN RELEASE

I am the ❑ PARENT ❑ LEGAL GUARDIAN of the minor.

Name (print) _____

I am signing this Release on behalf of said minor.

Parent/Guardian Signature _____

Date _____

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To parents of a minor child in a course at UCSC Extension:

Please complete the enclosed form and return it to UCSC Extension in the envelope provided. This form is required as a part of the enrollment process for any minor taking courses through UCSC Extension in Silicon Valley. It is a risk management form. Failure to return this form in a timely manner may result in your minor child having to withdraw from the UCSC Extension program.

If you have any questions about this form, please do not hesitate to contact me directly at (408) 861-3700 or cwalker@ucsc-extension.edu.

Sincerely,

Charlotte Walker
Registrar