

RELEASE OF LIABILITY

I, (print student name)agreement. In consideration of PAMC permitting me experience:	
I, for myself, my heirs, administrators, executors, are agree that I will never institute, prosecute, or in any war of any demand, claim, or suit against PAMC and/officially or otherwise, for any loss, damage, or injury occur from any cause whatsoever as a result of my particular or going to or from the facility.	y aid in the institution or prosecution or its agents or employees, acting to my person or property which may
If I should demand, claim, sue, or aid in any way suc indemnify PAMC all damages, expenses, and costs it n	_
I understand and agree that I may be held liable for an caused by my negligence, willful conduct, dishonesty of	,
I have read and fully understand the foregoing instrum my signature.	ent and agree to the same by affixing
Participant Name (printed or typed) Date Signed Signature	
FOR THE MINOR PARTICIPANT (if applicable)	
I/We, as parent(s) or guardian(s) of the above named participating in the activities of PAMC: Agree to the proadopt it as my/our own; and	
Agree to reimburse PAMC for any damage incurred liable were he/she 18 years of age.	by it for which this minor would be
Parent(s)/Guardian(s) (printed or typed)	Date Signed
Signature of Parent(s)/Guardian(s)	

Both the participant <u>and</u> parent/guardian, if applicable, shall execute this form. **Completed form will be maintained in Community Services file.**