

RELEASE AND INDEMNIFICATION AGREEMENT
The University of Texas at Austin

STUDENT:			
Name (last name first – please print or type)			
Address			
City, State, Zip Code			
DESCRIPTION OF ACTIVITY OR TRIP: Activities at or in connection with The University of Texas Marine Science Institute at Port Aransas and its programs and involving its facilities and/or staff. May include, but not limited to, activities involving its Personnel and/or Visitor Center, Laboratory, Auditorium, Dormitories, Cafeteria, Grounds, Vehicles, Research Vessels, Small Boats and/or the Animal Rehabilitation Keep.			
MODE OF TRANSPORTATION:		Vehicles, Research Vessels and/or Small Boats	
LOCATIONS(s) of activity or trip:		UTMSI-Port Aransas, Corpus Christi Bay Systems and/or the Gulf of Mexico	
DATE(s) of activity or trip:		FROM	TO

I, the above named student, am eighteen years of age or older and have voluntarily applied to participate in the above Activity or Trip. I acknowledge that the nature of the Activity or Trip may expose me to hazards or risks that may result in my illness, personal injury or death and I understand and appreciate the nature of such hazards and risks.

In consideration of my participation in the Activity or Trip, I hereby accept all risk to my health and of my injury or death that may result from such participation and I hereby release the above named Institution, its governing board, officers, employees and representatives from any and all liability to me, my personal representatives, estate, heirs, next of kin, and assigns for any and all claims and causes of action for loss of or damage to my property and for any all illness or injury to my person, including my death, that may result from or occur during my participation in the Activity or Trip, whether caused by negligence of the Institution, its governing board, officers, employees, or representatives, or otherwise. I further agree to indemnify and hold harmless the Institution and its governing board, officers, employees, and representatives from liability for the injury or death of any person(s) and damage to property that may result from my negligent or intentional act or omission while participating in the described Activity or Trip.

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR PARTICIPANT’S INJURY OR DEATH OR DAMAGE TO PARTICIPANT’S PROPERTY THAT OCCURS WHILE PARTICIPATING IN THE DESCRIBED ACTIVITY OR TRIP AND IT OBLIGATES ME TO INDEMNIFY THE PARTIES NAMED FOR ANY LIABILITY FOR INJURY OR DEATH OF ANY PERSON AND DAMAGE TO PROPERTY CAUSED BY PARTICIPANT’S NEGLIGENT OR INTENTIONAL ACT OR OMISSION.

	Date signed	
Signature of Student		
	Date signed	
Signature of Witness		
Printed Name of Witness	Form: ADULT-STUDENT - Revised 10/2009	