RELEASE AND INDEMNIFICATION AGREEMENT - Adult Non-Student

PARTICIPANT:
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 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 Boat and/or the Animal Rehabilitation Keep.
MODE OF TRANSPORTATION: Vehicles, Research Vessels and/or Small Boats
LOCATION(s) of activity or trip: <u>UTMSI-Port Aransas, Corpus Christi Bay Systems and/or the Gulf of Mexico</u>
DATE(s) of activity or trip: FROM:TO
I, the above named participant, 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 on my injury or death that may result from such participation and I hereby release the University of Texas a Austin, its governing board, officers, employees and representatives from any and all liability to me, me 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 and all illness or injury to my person, including my death, the may result from or occur during my participation in the Activity or Trip, whether caused by negligence of the University of Texas at Austin, its governing board, officers, employees, or representatives, or otherwise. further agree to indemnify and hold harmless the University of Texas at Austin and its governing board, officer employees, and representatives from liability for the injury or death of any person(s) and damage to proper that may result from my negligent or intentional act or omission while participating in the described Activity of Trip.
I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AN CAUSES OF ACTION FOR MY INJURY OR DEATH OR DAMAGE TO MY PROPERTY THAT OCCURS WHIL PARTICIPATING IN THE DESCRIBED ACTIVITY OR TRIP AND IT OBLIGATES ME TO INDEMNIFY THE PARTIE NAMED FOR ANY LIABILITY FOR INJURY OR DEATH OF ANY PERSON AND DAMAGE TO PROPERTY CAUSE BY MY NEGLIGENT OR INTENTIONAL ACT OR OMISSION.
Date signed: 20 Signature of Participant
Date signed: 20 Signature of Witness

Printed Name of Witness