**PERMISSION AGREEMENT, RELEASE AND WAIVER OF LIABILITY**

NAME of Activity/Field Trip

Brief Description of Activity:

|  |  |
| --- | --- |
| **Participant Name: (print)** |  |
| **Participant Age:** |  |
| **Parent Name: (if participant is under 18)** |  |
| **Club Name:** |  |
| **Location of Activity:** |  |
| **Date of Activity:** |  |

**Permission, Release and Waiver of Liability**

**This 4-H Activity/Field Trip Agreement and Release and Waiver of Liability shall be governed by and construed under the laws of the State of Iowa, which shall be the forum for any lawsuits arising from or incident to this Agreement.**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(participant or parent or guardian if participant is under age 18) give my permission for the above named individuals to participate in the (name of activity/field trip here) I hereby RELEASE FROM LIABILITY, IMDEMNIFY, and HOLD HARMLESS the State of Iowa, Board of Regents of the State of Iowa, Iowa State University, ISU Extension and Outreach, and (County name here) County Agricultural Extension District , (name of entity controlling location of activity here), and any of the officers, servants, agents and employees of the above-mentioned entities (hereinafter referred to as RELEASEES) for any liability, claim and/or cause of action arising out of or related to any loss, damage or injury, including death, costs or other expenses or liabilities incurred by me and anyone accompanying me, (including minors I am responsible for during this event), that occurs as a result of my or my child’s voluntary participation in this program. This release, however, is not intended to release the above-mentioned RELEASEES from liability arising out of their sole negligence.

**BY SIGNING THIS RELEASE AND WAIVER OF LIABILITY, I STATE THAT I HAVE READ AND UNDERSTAND THE CONDITIONS SET FORTH IN THIS RELEASE AND THAT I AGREE TO ALL CONDITIONS SET FORTH HEREIN, AND THAT I SIGN THIS VOLUNTARILY.**

|  |  |  |
| --- | --- | --- |
|   |  |  |
| Date |  | Participant Name (please print) |
|  |  |  |
|  |  | Participant Signature |
|  |  |  |
|  |  | Signature of Parent or Guardian (if Participant is under age 18) |

**NOTE: This Agreement and Release and Waiver of Liability must be signed by both the participant and the participant’s legal guardian if the participant is not EIGHTEEN (18) YEARS OLD**