



Permission and Indemnity Form

Please complete and return this form with your registration.

Student's Name _____ Date of Birth (MM/DD/YY): _____

Assumption of Risk

I affirm that my / my child's participation in Mathcamp and its activities is completely voluntary.

I acknowledge that participation in Mathcamp includes travel to and from the program, off-campus field trips, and recreational activities, and that this participation involves a risk of injury due to certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries.

I understand that the best way to make sure that participants remain safe and avoid injury is to follow the rules, regulations and instructions of the staff of Mathcamp. I agree that I/my child will learn and obey all the rules and regulations and will follow all instructions of the staff of Mathcamp.

I also understand that, despite safety precautions, Mathcamp cannot guarantee that I/my child will not be injured.

I recognize that Mathcamp cannot take responsibility for lost or stolen items at the program.

I agree to assume full responsibility for any risks, loss, or personal injury that may be sustained by me/my child, and/or any loss or damage to property owned by me/my child, as a result of attending, and/or traveling to or from Mathcamp.

At the sole discretion of Mathcamp staff, a student may be removed from the program for the safety of that student, other students, or for any other reason. In the case of a removal, the parent/guardian must resume custody of the student or provide alternate arrangements.

Release and Waiver of Claims

I release, hold harmless, and agree not to sue Mathcamp, the Mathematics Foundation of America (MFOA), and their officers, employees, volunteers, and any agents from and against all liability, claims, damages, losses, and expenses and demands, including court costs and attorney's fees and expenses, arising out of or related to any loss, damage, and/or injury, including death, that may be sustained by me/my child, or to any property belonging to me/my child, while traveling to or from, and/or attending Mathcamp.



Signatures

Parent/Guardian: By signing below, I acknowledge that I have read, understood, and agree to the terms outlined above, and that I fully understand the risks associated with participation in Mathcamp, and the consequences of signing this Agreement/Waiver. I knowingly, freely, and willingly give my child permission to participate.

Name of Parent/Guardian

Signature of Parent/Guardian

Date

Student: By signing below, I acknowledge that I have read, understood, and agree to the terms outlined above, and that I fully understand the risks associated with participation in Mathcamp, and the consequences of signing this Agreement/Waiver. I knowingly, freely, and willingly agree to participate.

Name of Student

Signature of Student

Date