

Los Angeles Unified School District Waiver and Release of Liability

As a participant in the following event: _____
_____.

I, by signing below, acknowledge my participation in the event is completely voluntary and at my own risk and I understand and agree to the following:

- I understand and agree that I will not be covered under any of LAUSD's liability or Workers' Compensation programs for any injury, death or damage incurred or caused as a result of my participation in the Event. I agree that I will be responsible (personally or through business or personal insurance) for any and all expenses incurred as a result of personal injuries, death and/or property damage from my participation or the participation of my employees and or volunteers, if any, in this Event.
- I agree that I am completely responsible for all liabilities, damages and injuries I may cause to LAUSD property, its members and employees and all third parties [e.g., spectators, buyers, etc.] as the result of my participation in this Event including personal injuries, death or property damage caused by my activities, equipment, displays, vehicles, supplies and goods, or items sold or otherwise distributed or brought to the School.

I FULLY AND FOREVER WAIVE AND RELEASE LAUSD, THE BOARD OF EDUCATION, ITS OFFICERS, EMPLOYEES AND AGENTS FROM ANY AND ALL RIGHTS, LIABILITY, CLAIMS, DAMAGES AND CAUSES OF ACTIONS OF ANY NATURE WHATSOEVER, KNOWN OR UNKNOWN, RELATING TO, ARISING OUT OF, OR OTHERWISE IN CONNECTION WITH THE EVENT.

Participant Name: _____

Signature: _____

Date: _____