

UNIVERSITY OF WYOMING WYOHACKATHON
AUTHORIZATION FOR MINOR TO PARTICIPATE, AND
RELEASE, ASSUMPTION OF RISK & AGREEMENT TO HOLD HARMLESS

I am the parent or legal guardian of _____ (Participant) who is a minor between the ages of 15 and 17. I have read and fully understand the Official Rules and Code of Conduct of the WyoHackathon and, understanding the Rules and Code of Conduct, along with the requirements stated on the registration documents, I authorize Participant to register and participate in the University of Wyoming WyoHackathon taking place at the University of Wyoming and virtually on September 23rd - October 24th, 2020 and I am agreeing to all of the Rules and Code of Conduct on behalf of Participant. I will be sure Participant understands the Rules and Code of Conduct and agrees to them as well.

I am aware that this event is open to any member of the public who meets the stated registration requirements. Minors are neither encouraged nor discouraged from registering and fully participating. I understand due to the nature of the event, it includes long and late night hours, and because it is an event open to the general public and not an event specifically for minors Participant will be interacting throughout the event with adult participants. All hacking activities, cots available for sleeping, and other public portions of the event are open to the public but are not being monitored by individuals specifically trained to supervise minors. The University, the contracted security company, and others will make every effort to keep participants and the public safe during the event, but I understand no additional security measures are being made for minor participants. I understand as the parent or legal guardian of Participant, I am welcome to attend any portion of the WyoHackathon to observe and ensure the safety of Participant. Unless I separately register, I will not be allowed to interfere or participate, but I will be allowed to observe any location where the Participant is during the event.

I am aware that participating in the WyoHackathon may be a dangerous activity involving A RISK OF INJURY to Participant ranging from minor injury such as tiredness and muscle soreness to serious injuries such as psychological/mental health issues, paralysis or even death. I am aware that such an injury can limit Participant's future life activities, including future earning capacity. I hereby grant permission for the University to give or authorize emergency medical treatment, if necessary. I understand and agree that the University assumes no responsibility for any injury, damage, cost, or financial obligation that might arise out of or in connection with such authorized emergency medical treatment.

In consideration of the University of Wyoming providing Participant with the opportunity to participate, I hereby assume all the associated risks, agree to the Rules and Code of Conduct, and agree to hold the University of Wyoming, its trustees, officers, employees, agents, representatives, instructors, and volunteers and the State of Wyoming harmless from any and all liability, actions, causes of action, debts, claims, or demands of any kind and nature whatsoever which may arise by or in connection with my participation. The terms hereof shall serve as a release and assumption of risk for myself, Participant's heirs, estate, executor, administrator, assignees and all members of Participant's family.

I have read and fully understand the contents, consequences and implications of signing this document. I am at least 18 years old, I have the legal capacity and authority to authorize Participant's activities and to make legal agreements on Participant's behalf, and signing the document is my own voluntary act.

PRINTED NAME

SIGNATURE

DATE