ATTACHMENT D

RELEASE FOR THE UNIVERSITY OF OKLAHOMA

On this day of	, 20, I c	certify that I am the Legal Representative of
		, (Minor's
Name)		
hereinafter ("Minor"), of _		,, and I have full authority to and do give permission for
Minor to participate		
	(Home Town)	(State)
in	, here	einafter ("the Event"), to be held at the University of Oklahoma ("the
University").		
University and Event Ru	les. I acknowledge	that I have read the University's rules stated herein or as otherwise
		shed on the University's websites,
		olicies.html and http://www.ou.edu/content/eoo/policies-
		abide by all University and Event rules and policies. Failure to
		ablished by the Event may result in Minor's immediate removal from
		ny other contract right upon removal. I certify that I have read and
		ed said rules to Minor. I understand and agree to notify the Event
		immediately of any injuries Minor sustains as a result of the Event
		periences related to the Event. I also understand and agree that if any
		ssault occur, I will immediately report those to both the Event
		and the University's Sexual Misconduct Officer at 405-
		policies.html. Initials:
understand that as a partic	cipant at the Event,	ersity often produces promotional material relating to its programs. I, Minor may be included in videotapes or photographs taken during the itations, I, in my own behalf and on behalf of the Minor, hereby assign,
~	•	klahoma, its successors, assignees, licensees, sponsors, any television
		ers the exclusive right to photograph and/or videotape the Minor and to
utilize such videotapes and	l photographs and N	Minor's name, face likeness, voice and appearance as a part of the Event,
in advertising and promot	ing the Event or in	advertising and promoting similar future events at no charge. Initials:
Medical Authorization.	As parent and/or le	egal guardian of Minor, I hereby give consent and authorize said Event,
the University and its ager	its, representatives	and employees to secure emergency medical treatment for Minor while
		he University and that I am responsible for any and all costs associated
		fy that if my child has any special medical considerations, including food
_		e in writing to the Event supervisor. Initials:
of other anergies, I have e	Jimmumeated those	thi writing to the Event supervisor. Initials.
Transportation. I certify	and agree that I am	n to pick-up and drop-off Minor only at the designated places and times.
-	_	designated area, I understand he/she will be taken to for pick-up.
	_	n his/her immediate withdrawal from the Event. Initials:
1 and to timely pick-up i	·IIIOI IIIMY IOSUIT III	I mo, not immediate withdrawar from the Dvent. Initials.
Release and Waiver. I, fo	or and on behalf of	Minor, myself, my and Minor's personal representatives, heirs, assigns

and next-of-kin, hereby release, waive, forever discharge, indemnify and covenant not to sue the Board of Regents of the University of Oklahoma, its officers, members, employees, volunteers, agents and representatives for any and all loss, damages, claim, demand, action or right of action, arising from or by reason of any injury resulting or to result

from participation in the Event. I, for and on behalf of Minor, myself, my and Minor's personal representatives, heirs, assigns and next-of-kin, agree to hold harmless, defend and indemnify, for any and all loss, damages, claim, demand, action or right of action, arising from or by reason of any injury resulting or to result from participation in the Event. This contains the entire agreement between the parties hereto and all terms are contractual and not a mere recital. I further state that Minor and I have each carefully read the foregoing Release and Acknowledgement as his/her own free and voluntary act. I am at least eighteen years of age and sign this Release and Waiver voluntarily.

	/		
Parent/Guardian Printed Name Date		Signature	
School/Squad Name (if applicable)			
Address of Parent and/or Legal Guardian	1:		
Home Phone:	Work Phone:		
Cell Phone:	Email ad		
Emergency Contact other than parent or	guardian if they cann	ot be reached:	
Contact			
Phone			
Any questions regarding this form shoul		ead Supervisor	a