FORM H-- VIRTUAL PROGRAMS RELEASE FOR THE UNIVERSITY OF OKLAHOMA

On this day of	, 20, I certify that I am the Legal
	, (Youth's Name)
hereinafter ("Youth"), ofauthority to and do give permission for You	(Home Town),(State), and I have full th to
participate insponsored by the University of Oklahoma h	(name of the virtual event), hereinafter ("the Event") ereinafter ("the University").
otherwise advised at the time of the Event,	e that I have read the University's rules stated herein or as and as published on the University's websites, and www.ou.edu/home/misc.html and understand and
agree to abide by all University and Event rother rule established by the Event may resclaim for refund or any other contract right	ales and policies. Failure to comply with these rules or any alt in Youth's immediate removal from the Event. I waive any upon removal. I certify that I have read and understand the
expectations of Youth related to the virtual	rams for Youth Protocols as well as any behavioral program and have explained said rules to Youth. I understand
of any injuries Youth sustains as a result of experiences related to the Event. I also und harassment or assault occur, I will immedia	at immediately the Event and of any inappropriate behavior Youth erstand and agree that if any issues of sexual misconduct, ely report those to both the Event supervisor and the University's Sexual Misconduct
Officer at 405-325-2215 or www.ou.edu/ho	me/misc.html Initials:
programs. I understand that as a participant videotapes or photographs taken during the own behalf and on behalf of the Youth, here its successors, assignees, licensees, sponsor the exclusive right to record, photograph and photographs and Youth's name, face likene	rsity often produces promotional material relating to its in the Event, Youth may be included in recordings, Event. Therefore, without reservation or limitations, I, in my by assign, transfer and grant to The University of Oklahoma, s, any television networks, and all other commercial exhibitors d/or videotape the Youth and to utilize such videotapes and ss, voice and appearance as a part of the Event, in advertising and promoting similar future events at no charge. Initials:
offered on the ZOOM platform and the use consent to Youth participating on the ZOOI described in the University's Virtual Progra are not permitted to send private direct mes Group messages and posts regarding the Ev	on. University Online Virtual Programs for Youth will be of multimedia communications will be implemented. I M platform under the conditions described herein. As ms for Youths Protocols, Event supervisors/online teachers tages, texts, chats, or personal emails to Youth. However, ent are acceptable and must be viewable by all Youths and Event supervisors/online teachers to provide necessary

Release and Waiver. I, for and on behalf of Youth, myself, my and Youth'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,

phone number and email address below and consent to these communications. Initials:

communications to Youth they may text or email for program purposes only, and they must copy Youth's Parent(s) or Legal Guardian(s). In order to comply Parents and/or Legal Guardians must provide current

agents, students 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 Youth, myself, my and Youth'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 I have carefully read and understand the foregoing Release and Acknowledgement and have explained the same to Youth,

who also agrees to it 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) Signature Date Address, Phone number and Email of Parent and/or Legal Guardian: City______State_____Zip____ Cell Phone: _____ Work Phone: ____ Email address: Participant Cell Phone: Participant Email address: **Emergency Contact other than parent or guardian if they cannot be reached:** Any questions regarding this form should be directed to the Head Supervisor _____ at _____