

College of Agricultural and Environmental Sciences
Department of Animal Science

Release, Waiver of Liability and Covenant Not to Sue

READ CAREFULLY BEFORE SIGNING

I certify that I am the parent or legal guardian of _____
(name of student) who will be a participant in the Department of Animal Science program from
June 2-3, 2016. I have been informed that during this program my child will participate in the
following activities: UGA Livestock Judging Camp.

I hereby acknowledge my awareness that participation in this program may expose my child to
risk of property damage and bodily or personal injury, including injury that may prove fatal. I
understand that the risks my child may be exposed to include: Supervised activities involving
livestock and transportation as well as other risks that may not be foreseeable. I
agree that I will discuss with my child the importance of following the guidelines, instructions
and recommendations of The University of Georgia faculty and staff members in charge of the
program.

For the sole consideration of The University of Georgia's arranging for my child to participate in
the program, I hereby release and forever discharge The University of Georgia, the Board of
Regents of The University System of Georgia, their members individually and their officers,
agents, and employees from any and all claims, demands, rights and causes of action of whatever
kind that I may have, either in my own behalf or in my capacity as legal representative of my
child, arising from or in any way connected with my child's participation in the program.

I understand that the acceptance of this Release, Waiver of Liability and Covenant Not to Sue by
the Board of Regents of The University System of Georgia shall not constitute a waiver, in
whole or in part, of sovereign immunity by said Board, its members, officers, agents and
employees.

I certify that my child is participating in the event with my full knowledge and consent, and that
he or she has my permission to participate in all activities. I also certify that I have read and
understood the above.

Signature _____

Date _____

Printed Name _____

Address _____

Phone Number _____

Relationship to Student _____