LIABILITY RELEASE – ASPIRE PROGRAM

This is a legally binding Release made by me, ________________________________________,
to the University of Massachusetts.

I fully recognize that there are dangers and risks to which I may be exposed by participating in Laboratory Experiments during the ASPIRE Program. The following is a description and examples of specific, significant, non-obvious dangers and risks associated with this activity:

- Possible exposure to flammable, toxic or carcinogenic materials
- Possible exposure to strong magnetic fields
- Possible exposure to open flames, hot containers, or hot surfaces
- Being near powerful or destructive machinery

I understand that the University does not require me to participate in this activity, but I want to do so, despite the possible dangers and risks and despite this Release.

I therefore agree, in consideration of and return for the services, facilities, and other assistance provided to me by the University in this activity, to RELEASE the University (and its Board of Trustees, officers, employees, and agents) from any and all liability, claims and actions that may arise from injury or harm to me, from my death or from damage to my property in connection with my participation in this activity. I understand that this RELEASE covers liability, claims and actions caused entirely or in part by any acts or failures to act of the University (or its Trustees, employees, or agents), including but not limited to negligence, mistake, or failure to supervise by the University.

I recognize that this RELEASE means I am giving up, among other things, rights to sue the University, its Trustees, employees, and agents for injuries, damages, or losses I may incur. I also understand that this Release binds my heirs, executors, administrators, and assigns, as well as myself.

I have read this entire Release; I fully understand it and I agree to be legally bound by it.

THIS IS A RELEASE OF YOUR RIGHTS. READ CAREFULLY BEFORE SIGNING.

_________________________________  ___________________________________
(Releasor’s Signature/Date)        (Witness Signature/Date)

(Parent or Guardian Signature if Releasor is under 18 years old) (Date)
UMass MRSEC
Photo Release – ASPIRE Program

For purposes of fulfilling our National Science Foundation (NSF) obligations, we utilize photographs of participants in our Outreach events for NSF reporting purposes, websites, printed materials, and presentations to advertise the program. Please review and, if you agree, sign the release below:

I, participant’s parent/legal guardian, ____________________________, do hereby give the Materials Research Science and Engineering Center at the University of Massachusetts Amherst, its assigns, licenses, and legal representatives the irrevocable right to use my child’s name and photograph in all forms and media and in all manners, including composite representations, and advertising and other lawful purposes, and I waive any right to inspect or approve the finished product including writing copy, that may be created in connection therewith.

I have read this release and am fully familiar with its contents.

Participant’s Name: _____________________________________________

Participant’s School: ___________________________________________

Parent/Legal Guardian Name: _____________________________________

Parent/Legal Guardian Signature: _________________________________

Date: ______________