

HSC OP 52.19 ATTACHMENT B  
YOUTH PARTICIPANT PROGRAM AGREEMENT

This Individual Program Agreement (“Agreement”) is made by and between Texas Tech University Health Sciences Center, a public institution of higher education in the State of Texas (“University”), and the adult parent or guardian named below (“Guardian”), on behalf of such Guardian and the minor participant (“Participant”).

Youth Program: \_\_\_\_\_ Sponsor: \_\_\_\_\_

Location: \_\_\_\_\_

\*Overnight Program? Yes No If Yes, Residence Hall Name: \_\_\_\_\_

Arrival Date/Time: \_\_\_\_\_ Departure Date/Time: \_\_\_\_\_

Participant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Participant Phone Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

\*If Participant is staying overnight on University campus, additional forms may be required.

1. **Conduct and Compliance.** Guardian acknowledges that the Participant’s involvement in the Program is voluntary and that as a condition of Participant’s involvement, Guardian agrees to comply with all University and Program requirements including, but not limited to: (a) accurately completing all registration forms in a timely manner, (b) ensuring that the Participant is aware of the University’s and Program’s standards of conduct; (c) and immediately notifying the Program Administrator of any concerns related to the health, safety or security of the Participant or other individuals. Guardian represents Participant will comply with all applicable federal, state, and local laws and University operating policies and direction in Participant’s conduct while engaging in the Program.
2. **Acknowledgment of Risk.** Guardian acknowledges that the nature of the Program, including but not limited to possible overnight stays in University’s residence halls and all other activities associated with the Program, may expose Participant to dangers, hazards, or risks that may result in personal injury, illness, disability, death, property damage, or economic loss caused by: (a) participating in the Program

Guardian and Participant; (c) Participant is physically and mentally able to participate in all aspects of the Program or related activities; and (d) Participant can be in the presence of, as well as use, the materials, tools, supplies, or equipment or other items associated with or utilized during the Program or related activities.

4. Indemnification and Release of University . Guardian understands and agrees that although University takes reasonable precautions to maintain adequate security, University cannot be expected to control or avoid all risks, including risks of exposure to communicable illness, associated with participation in the Program, including possible overnight stays in a University residence hall. Therefore, in consideration of the benefits Guardian and Participant will receive through Participant's participation in the Program, Guardian agrees to hereby RELEASE, PROTECT, INDEMNIFY, AND HOLD HARMLESS, UNIVERSITY AND ITS AFFILIATES, REGENTS, EMPLOYEES, AGENTS, AND VOLUNTEERS FROM AND AGAINST ALL CLAIMS, DAMAGES, LIABILITIES, EXPENSES, AND

6. Media, Photo, and Video Release .

Yes - Guardian understands that during the course of the Program, and those acting with the University's permission or authority, may capture Participant's name, likeness, image, voice, or works (e.g., art work) in photographic, audio, video, digital, or other recording forms ("Recordings"). Guardian authorizes the University and the Program to use those Recordings for any purpose consistent with the University's mission, including but not limited to promotional, commercial, informational, and educational purposes in any and all media (including the Internet) now existing or hereafter devised. Guardian understands that Guardian will not have an opportunity to review or approve uses of the Recordings. Guardian recognizes that the University holds the copyright in all Recordings. Guardian understands that neither Participant nor Guardian will receive payment or any other compensation for the taking or use of any Recordings created as a result of Participant attending the Program. Guardian, on behalf of Participant, hereby waives any and all rights, compensation, royalties, or other payment in connection with the Recordings. Guardian releases, indemnifies, and holds harmless the University and its affiliates, regents, employees, agents, and volunteers from and against all liability, actions, debts, claims and demands of every kind whatsoever to the taking or use of the Recordings of Participant.

No - Guardian does not grant permission to University or Program to use Participant's name, likeness, image, voice, or works (e.g., art work) in photographic, audio, video, digital, or other recording forms ("Recordings") for any purpose consistent with the University's mission, including but not limited to promotional, commercial, informational, and educational purposes in any and all media (including the Internet) now existing or hereafter devised. Guardian understands that Guardian will not have an opportunity to review or approve uses of the Recordings. Guardian recognizes that the University holds the copyright in all Recordings. Guardian understands that neither Participant nor Guardian will receive payment or any other compensation for the taking or use of any Recordings created as a result of Participant attending the Program. Guardian, on behalf of Participant, hereby waives any and all rights, compensation, royalties, or other payment in connection with the Recordings. Guardian releases, indemnifies, and holds harmless the University and its affiliates, regents, employees, agents, and volunteers from and against all liability, actions, debts, claims and demands of every kind whatsoever to the taking or use of the Recordings of Participant.

Guardian, individually and on behalf of Participant:

\_\_\_\_\_  
Guardian's Signature

\_\_\_\_\_  
Guardian's Relationship to Participant

\_\_\_\_\_  
Guardian's Printed Name

\_\_\_\_\_  
Guardian's Cell Phone Number

\_\_\_\_\_  
Date

\_\_\_\_\_  
Guardian's Alternate Phone Number/Email

Emergency Contact (Other than Guardian):

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Emergency Contact Phone Number

\_\_\_\_\_  
Relationship to Participant

\_\_\_\_\_  
Alternate Emergency Contact Number/Email

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