**RELEASE OF LIABILITY**

**READ CAREFULLY – THIS AFFECTS YOUR LEGAL RIGHTS**

I/We \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in consideration of the request to have the Moreno Valley College, STEM MOBILE INNOVATION CENTER at our scheduled activity on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_ intending to be legally bound hereby, the undersigned agrees and does hereby release from liability and to indemnify and hold harmless the Riverside Community College District as regards to the on-line scheduled participation of the Moreno Valley College STEM Mobile Innovation Center at our school/district activities namely titled:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(List School Site and/or Name of Event)*

The undersigned further agrees to abide by all the safety guidelines, rules and regulations promulgated by Moreno Valley College throughout the visit of the STEM Mobile Innovation Center at our School and/or District site, and I/We recognize that there are certain inherent risks associated with scientific activities presented on the STEM Mobile Innovation Center. I/We assume full responsibility for any personal injury to myself and (if applicable) my family members, heirs and assigns. I/We further release and discharge the Riverside Community College District for injury, whether caused by the fault of myself, my family, heirs, assigns, the Riverside Community College District Staff or other third parties.

**I/WE HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE THE RIVERSIDE COMMUNITY COLLEGE DISTRICT, OR ANY OF ITS COLLEGES,** its Trustees, officers, employees, agents or volunteers, and if applicable, owners and lessors of premises on which the activity takes place **FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY/OUR ACCOUNT CAUSED BY OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE “RELEASEES.” I/WE FURTHER AGREE, that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT** I/WE, or my/our minor child/ward, or anyone on my/our behalf make a claim against any of the Releasees, I/WE WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, arbitration expenses, medical expenses, attorney fees, loss, liability, damage or cost which may be incurred as the result of such claim.

Any legal or equitable claim that may arise from participation in the above shall be resolved under California Law.

**I/WE HAVE READ THIS DOCUMENT AND UNDERSTAND IT. I/WE FURTHER UNDERSTAND THAT BY SIGNING THE RELEASE, I/WE VOLUNTARILY SURRENDER CERTAIN LEGAL RIGHTS AND ACKNOWLEDGE READING, UNDERSTANDING, AND AGREE WITH THE TERMS AND CONDITIONS, GUIDELINES, WAIVER AND RELEASE FORM**

Dated: \_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Representative *(Please Print)*  Signature

Official Title & School and/or District\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_