

OVERNIGHT AND CLASS VISITATION PROGRAM
Spring 2012



In consideration for permitting my child to participate in the Overnight and Class Visitation Program (the “Event”) including traveling to and from New York City and spending one night on the campus of Polytechnic Institute of New York University while participating in the Event, I hereby agree:

(a) to release and discharge Polytechnic Institute of New York University (the “University”) from any liability or responsibility for any personal or bodily injury (including death), and for any damage to or loss of property, however caused, that my child or I suffer as a result of or in connection with my child’s participation in the Event including traveling to and from New York City and spending one night on the campus of the Polytechnic Institute of New York University, including, without being limited to, any injury, loss, or damage resulting from, arising out of, or occurring in connection with the negligent acts or omissions of members of the faculty or administration or other employees or agents of the University;

(b) not to raise any claim or institute any legal action or proceeding, on my behalf or on behalf of my child, against the University for cause of action that may result from or arise out of or in connection with my child’s participation in the Event including traveling to and from New York City and spending one night on the campus of the Polytechnic Institute of New York University, for any injury (including death) to my child, including, without being limited to, injury, loss, or damage that may result from or arising out of or in connection with the negligent acts or omissions of members of the faculty or administration or other employees or agents of the University; and

(c) to indemnify the University and hold it safe and harmless from and against any claim or cause of action asserted by my child, or on behalf of my child, against the University, for loss of, or damage or injury (including death) to, his or her person or property resulting from, arising out of, or occurring in connection with the negligent acts or omissions of members of the faculty or administration or other employees or agents of the University.

All references to the University in this form shall include, and all provisions of this form shall inure to the benefit of, the University’s trustees, officers, employees, agents, servants, and representatives.

I have no knowledge of any physical impairment that would affect my child’s ability to participate in the Event including traveling to and from New York City and spending one night on the campus of the Polytechnic Institute of New York University. I authorize the

University to request medical treatment as necessary to insure the well-being of my child while attending the Event including traveling to and from New York City and spending one night on the campus of the University.

I agree that my child will comply with all applicable rules, policies, and procedures of the University including but not limited to the University's Residential Education Handbook, which can be found at:

http://www.poly.edu/sites/polyproto.poly.edu/files/Student_Housing_Handbook.pdf

This release shall be governed by and construed in accordance with the laws of the State of New York applicable to contracts entered into and intended to be performed solely within the State of New York. I shall submit to the jurisdiction of the federal and state courts located in Kings County, New York State, for the resolution of disputes arising hereunder or relating hereto, regardless of the place of execution hereof.

Print Parent/ Legal Guardian Name

Parent/Legal Guardian Signature

Address

Child's Name

Date

Please circle the dates of program in which student is participating:

March 4th - 5th, 2012

April 1st - 2nd, 2012

March 18th - 19th 2012

April 15th - 16th, 2012

March 25th - 26th 2012