

**Gannon University
Criminal Investigators Camp
Waiver of Liability, Indemnity Agreement and Assumption of Risk**

Printed Name of Participant: _____

Printed Name of Parent or Guardian: _____

Waiver: In consideration of permission to use, today and on all future dates, the property, facilities, and services of Gannon University, I, on behalf of myself, my son/daughter, my heirs, personal representatives, or assigns, do hereby release, waive, discharge and covenant not to sue Gannon University, its directors, officers, employees, volunteers, independent contractors, and agents from liability from any and all claims arising from both ordinary and negligence of Gannon University or any of the aforementioned parties. This agreement applies to 1) personal injury from accidents or illnesses arising from my son and/or daughter's participation in Gannon University's Criminal Investigators Camp including, but not limited to organized activities such as the following:

- observing explosives demonstrations,
- participating in firearms simulations,
- travel to and participation in the AirSoft activity (participants use replica firearms called Airsoft guns to eliminate opponents by shooting each other with non-metallic pellets),
- attending camp educational sessions at and around Gannon University located in downtown Erie, PA
- staying overnight in University housing,

use of the facilities, premises, or equipment; and to 2) any and all claims resulting from the damage to, loss of, or theft of property.

Indemnification and Hold Harmless: I also agree to HOLD HARMLESS AND INDEMNIFY Gannon University from all claims resulting from negligence and to reimburse them from any expenses incurred as a result of my son/daughter's participation in Gannon University's Criminal Investigators Camp. I further agree to pay all costs and attorney's fees incurred by Gannon University in investigating and defending a claim or suit if my claim is withdrawn, or to the extent a court or arbitration determines that Gannon University is not responsible for injury or loss.

Severability and Venue: The undersigned further expressly agrees that the foregoing waiver assumption of risk agreement is intended to be as broad and inclusive as is permitted, by the law of the Commonwealth of Pennsylvania and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. Likewise, I agree that if legal action is brought, it must be brought in Erie County, Pennsylvania.

Acknowledgement of Understanding: I have read this waiver of liability and indemnification agreement and fully understand its terms. I understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law in the Commonwealth of Pennsylvania.

Parent or Guardian Signature

Date

