

**ARKANSAS FOLK AND TRADITIONAL ARTS PROGRAM
RELEASE AND WAIVER OF LIABILITY**

For and in consideration of the agreement of the University of Arkansas to permit me to voluntarily participate in the Arkansas Folk and Traditional Arts program, I hereby generally and forever release and discharge, and agree not to sue the University of Arkansas, its officers, employees and agents, from and against any and all manner of claims, causes of action, or liability which I may have now or at any time in the future against the University of Arkansas, its officers, employees and agents, which may arise out of or relate to any injury, loss, damage or harm of any kind which may result or may happen to me while I am participating in the program. This release includes, but is not limited to, any risk of illness, infection, or harm that may arise from the COVID-19 pandemic. _____ . (Please initial).

I further agree to indemnify, defend, protect, and hold harmless the University of Arkansas, its officers, employees, and agents from and against any and all manner of claims, causes of action, or liability, arising out of or relating to any accident, injury illness or damage, including death, to me which may occur during my voluntary participation in the program. _____ . (Please initial).

I am solely responsible for development of my plan of work and choice of any work methods, locations, tools, equipment, safety planning, and materials, and assume all risks inherent in my activities. _____ (Please initial).

I HAVE CAREFULLY READ THIS RELEASE AND WAIVER OF LIABILITY AND FULLY UNDERSTAND ITS CONTENTS. I ACKNOWLEDGE AND AGREE THAT THIS RELEASE AND WAIVER OF LIABILITY SHALL BE BINDING UPON MY SURVIVORS, HEIRS, SUCCESSORS, AND ASSIGNS. I AM AWARE THAT THIS RELEASE AND WAIVER OF LIABILITY IS A RELEASE OF LIABILITY, INCLUDING BUT NOT LIMITED TO, LIABILITY FOR NEGLIGENCE, AND AN INDEMNIFICATION AGREEMENT, AND I SIGN IT OF MY OWN FREE WILL. _____(Please initial).

I state that I am over the age of eighteen (18) years and am competent to execute this Release and Waiver of Liability.

Name (Please Print): _____

Signature: _____

Date: _____

If a participant is under the age of eighteen (18) years, this Release and Waiver of Liability must be executed by the participant's parents:

Name (Please Print): _____

Participant's Signature: _____

Date: _____

Parent(s)' Name
(Please Print): _____

Parent(s)' Signature: _____

Date: _____