

YMUN India Liability Form — Delegate

No delegate will be allowed to participate in YMUN India without this form on file. Parents and Advisors must sign this form to be considered complete.

Assumption of Risk, Release from Liability, and Indemnification Form

My child, ______, will participate in the "Yale" Model United Nations India (YMUN India), from January 12 to 24, 2024, the "Program". The Program is organized and run by the Yale International Relations Association, a registered undergraduate student organization of Yale University. This document ("Agreement") covers all aspects of my child's participation in the Program. In this Agreement, "Yale" means Yale, its trustees, officers, employees, trainees, students, volunteers, and agents.

1. Agreement to the Terms and Conditions. I have read and understood the Terms and Conditions of YMUN India. By affixing my signature to this form, I agree to follow it under any circumstance.

2. Program Risks. I understand that participation in the Program involves risks that Yale cannot eliminate, including, among others, risk of property damage, illness, bodily injury, permanent disability, and death.

3. Assumption of Risk. I voluntarily take responsibility for all risks of participating in the Program.

4. Release. In exchange for Yale allowing my child to participate in the Program, I release Yale from all legal and financial responsibility for any harm that I, my child, or our property might suffer as a result of my child's participation, even if the harm is caused by Yale's negligence.

5. Indemnification. I agree to indemnify and hold Yale harmless from (that is to say, I agree to pay or reimburse Yale for) any costs, penalties, legal fees, or judgments ("Costs") that Yale has to pay related to my child's participation in the Program, even if the Costs resulted from Yale's negligence.

6. Binding Agreement. This Agreement shall legally bind me, and my child, family members, spouse, estate, heirs, administrators, or personal representatives.

7. Severability. If a court decides that any part of this Agreement cannot be enforced, I agree to change that part to make it enforceable. If the unenforceable part cannot legally be changed, it will be severed, but the rest of the Agreement will remain in effect.

9. Signature. I agree that I have read and understood this Agreement, I am competent to sign it, and I do so voluntarily and without relying on anything Yale wrote or told me except what is written above. I understand that I am free not to sign this Agreement and to find a different program for my child.

Before you sign this Agreement, please read it carefully because it affects your legal rights.

Printed Name of Parent/Legal Guardian:

Signature of Parent/Legal Guardian:

Date:

Child's Name (printed):

Child's Birthdate: ____/ ___/

School of Child:

Permission to Use Images and Recordings of Your Child and His or Her Work

During the course of "Yale" Model United Nations India (YMUN India), from January 12 to 14, 2023 ("the Program"), we may use photographs, videos, films, or other media to record or otherwise capture your child's image or voice or material resulting from his or her activities or performances (collectively, "Images and Recordings"). As described below, this form allows Yale University and its contractors, agents, and licensees ("Yale") to use those Images and Recordings. In exchange for Yale allowing your child to participate in the Program, you agree to the following:

1. You grant to Yale the permanent right to use the Images and Recordings in all types of media in connection with the Program and for other purposes that support Yale's not-for-profit mission. This permission includes use of the Images and Recordings in any new types of media that might be developed in the future.

2. Neither you nor anyone else acting on behalf of your child will have any right to approve or be paid for Yale's use of the Images and Recordings.

3. Neither you nor anyone else acting on behalf of your child will have any right to make a legal claim as a result of Yale's use of the Images and Recordings, and any such claim is covered by the "Assumption of Risk, Release from Liability and Indemnification" that you have signed.

Printed Name of Parent/Legal Guardian:

Signature of Parent/Legal Guardian:

Date:

Child's Name (printed):

Child's Birthdate: ____/___/

School of Child:

Parent Emergency Contact Information

In the event of an emergency, I (legal parent or guardian) can be reached at: Daytime Phone #: _____ Evening Phone #: _____ Name of Alternate Contact (Please Print):

Daytime Phone #: _____ Evening Phone #: _____