

*Brown University Simulation of the United Nations  
Release and Indemnification Agreement for Minors*

NAME of MINOR PARTICIPANT:

\_\_\_\_\_

DELEGATION / SCHOOL:

\_\_\_\_\_

INSTITUTION:

**Brown Model United Nations**

*A Registered Student Group of Brown University*

75 Brown Street, Box 1930

Providence, RI 02912-1930

**DESCRIPTION OF ACTIVITY:**

The **Participant** will register at Brown University and participate in the Brown University Simulation of the United Nations (**BUSUN**) of Brown Model UN (**BMUN**). The **Participant** will attend committee sessions and other events held on the campus of Brown University.

**LOCATION:**

Brown University, Providence, Rhode Island

**DATE:**

November 12, 2010 through November 14, 2010

I, the Parent/Guardian of the above-named **Participant**, which **Participant** is under eighteen years of age, do certify that I am fully competent to sign this Agreement. I give permission for the **Participant** to participate in the above-referenced **BUSUN** conference. I acknowledge that working in this setting may expose the **Participant** to hazards or risks that may result in the **Participant**'s illness or personal injury, and I understand and appreciate the nature of such hazards and risks. I recognize that the **Participant** must abide by all regulations established by the **BMUN** team and by all applicable laws and regulations, and I understand that the **Participant**'s failure to do so may result in the **Participant**'s dismissal from **BUSUN**, requiring me to make arrangements for, and to pay all of the costs relating to, the **Participant**'s departure.

In consideration of the **Participant** being permitted to participate in **BUSUN**, and recognizing that the **Participant** is not enrolled at the University nor paying any tuition or fee, I hereby accept all risk to **Participant**'s health and all risk of his/her injury that may result from such participation, and I hereby release **BMUN**, **BUSUN**, and **Brown University**, including their governing boards, officers, employees, and representatives from any and all liability to **Participant**, **Participant**'s personal representatives, estate, heirs, next of kin, and assigns for any and all claims and causes of action for loss of or damage to **Participant**'s property and for any and all illness or injury to **Participant**'s person that may result from or occur during **Participant**'s participation in **BUSUN**, whether caused by negligence of **BMUN**, **BUSUN**, or **Brown University**, their governing boards, officers, employees, or representatives, or otherwise. I further agree to indemnify and hold harmless **BMUN**, **BUSUN**, and **Brown University** and their governing boards, officers, employees, and representatives from liability for the injury of any person(s) and damage to property that may result from **Participant**'s negligent or intentional act or omission while participating in **BUSUN**.

**I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR PARTICIPANT'S INJURY OR DAMAGE TO PARTICIPANT'S PROPERTY THAT OCCURS WHILE PARTICIPATING IN THE DESCRIBED ACTIVITY OR TRIP. I FURTHER UNDERSTAND THAT THIS AGREEMENT OBLIGATES ME TO INDEMNIFY THE PARTIES NAMED FOR ANY LIABILITY FOR INJURY OF ANY PERSON AND ANY DAMAGE TO PROPERTY CAUSED BY PARTICIPANT'S NEGLIGENT OR INTENTIONAL ACT OR OMISSION.**

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Address (if different from Participant's)

\_\_\_\_\_  
Date Signed