

**VIRGINIA DEPARTMENT OF EDUCATION
VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY**

2019 Summer Residential Governor's Schools

PARENT OR GUARDIAN WAIVER OF LIABILITY

Name of Attendee: _____

I hereby release, indemnify and hold harmless the Commonwealth of Virginia, the Virginia Department of Education, and Virginia Polytechnic Institute and State University and their respective agents and employees from liability in the event of accident, harm, or injury to the above named person while he/she is using the equipment, or when he/she is in or about the buildings and/or grounds of the host site and on field trips during the 2019 Summer Residential Governor's School, whether or not resulting from the negligence of the Commonwealth of Virginia, the Virginia Department of Education, Virginia Polytechnic Institute and State University, or their agents.

By typing or drawing my signature below, I acknowledge that it is my intent to electronically sign this document and agree to the use of electronic records for the purposes provided herein.

Signature of Parent or Guardian

Date