

# Pratt School of Engineering

## Laboratory visit

### *Legal Release*

Student's Name Printed: \_\_\_\_\_

The above named student, and the parent or legal guardian of the above named student, who is under 18 years, as a visitor to the Pratt School of Engineering at Duke University, do hereby acknowledge, agree, promise and covenant with Duke University and its trustees, officers, employees, agents and all other persons or entities, and do hereby release, hold harmless and discharge Duke University and its trustees, officers, employees, agents and all others persons or entities involved with the Pratt School Visit from any and all liability for any injury, death, illness, disease and damage which my child might sustain while participating in activities sponsored by or associated with the Pratt School or Duke University. I execute this release on behalf of and with specific intent to legally bind myself, my heirs, assigned personal representatives and estate.

The student will participate in the Engineer for a Day symposium hosted by the Pratt School of Engineering. The event will take place on March 23, 2018 from 8:30am to 4:30pm. During the event, the student will meet with faculty and engineering students, will learn about STEM (Science, Technology, Engineering and Math) careers and research topics, and tour STEM facilities in West campus. The student will be accompanied by a teacher from their school throughout the day, and by a member of the staff hosting the event.

I hereby certify that my child has no medical conditions which will prevent normal participation in the Pratt School visits. I further understand and acknowledge that no medical insurance benefits will be provided by Duke University or the Pratt School for my child during these visits.

I hereby certify that my child will voluntarily participate in the Pratt School of Engineering Visits and I hereby grant permission to those appropriate personnel of the Pratt School to seek medical assistance for my child should the same be required, recognizing that neither the Pratt School nor any other entity or individual involved with the Pratt School Visits assumes responsibility for, nor do they have any liability for, the medical assistance and care which may be so selected and provided.

### **Participant's Release and Agreement**

My signature below indicates that I have read this entire document, understand it completely and agree to be bound by its terms.

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian Name Printed: \_\_\_\_\_