## THE UCLA FAMILY COMMONS

## Waiver of Liability, Assumption of the Risk, Indemnity Agreement and Agreement to Terms and Conditions

Parent/Guardian Name		(please print)
Child's Name	Age	(please print)
Child's Name	Age	(please print)
WAIVER: In consideration of being permitted to particip commons, hereinafter called "The Activity", I, for myself release, waive, discharge and covenant not to sue T and agents from liability from any and all claims inclu California, its officers, employees and agents, result property loss arising from, but not limited to, participation	, my heirs, personal rep The Regents of the Univ ding the negligence o ting in personal injury, a	resentatives or assigns, do hereby rersity of California, its officers, employees, f The Regents of the University of
Signature (of Parent/Guardian if minor)	Date	
<b>ASSUMPTION OF RISKS:</b> Participation in The Activity regardless of the care taken to avoid injuries. The specific participation in Juries and sprain injuries, heart attacks, and concussions; to (3) catastrop	cific risks vary from one s; (2) major injuries suc	activity to another, but the risks range from h as eye injury or loss of sight, joint or back
I have read the previous paragraphs and I know, un inherent in The Activity. I hereby assert that my par		
INDEMNIFICATION AND HOLD HARMLESS: I also ag California HARMLESS from any and all claims, actions, including attorney's fees brought as a result of my involvex expenses incurred.	, suits, procedures, cost	s, expenses, damages and liabilities,
<b>SEVERABILITY:</b> The undersigned further expressly ag is intended to be as broad and inclusive as is permitted is held invalid, it is agreed that the balance shall, notwit	by the law of the State	of California and that if any portion thereof
<b>PHOTO RELEASE:</b> I hereby give my consent for THE I and likeness to be used in its promotional materials. I rechildren and myself and attest that I am the parent or le	elease them from any ex	xpectation of confidentiality for minor
<b>MARTIAL ARTS POLICY:</b> Your credit card on file will us in writing at any time to cancel or place your membe you may make up any missed classes.		
ACKNOWLEDGEMENT OF UNDERSTANDING: I have agreement, fully understand its terms, and understand sue. I acknowledge that I am signing the agreement free complete and unconditional release of all liability to	that I am giving up su eely and voluntarily, and	ubstantial rights, including my right to I intend by my signature to be a
Signature (of Parent/Guardian if minor)	Date	

## THE UCLA FAMILY COMMONS - FAMILY COACHING PROGRAM

## **DISCLAIMER – WAIVER OF LIABILITY**

<b>ACKNOWLEDGMENT:</b> By signing below, I, the following:	, expressly acknowledge and agree to all of
GOALS OF FAMILY COACHING: Family Coaching Sessions UCLA Coach. The Family Coaching Sessions are designed to their stated goals in a family-oriented environment. The Family that will enable them to learn and develop skills in areas such a communication.	assist participating individuals and families in reaching Coaching Sessions provide participants with information
psychological counseling or any other form of mental health ser the State of California to provide certain clinical care, the Coach constitute therapy or psychological counseling. None of the Fa a substitute for treatment of, any medical or mental health cond	rvices. While certain of the Coaches are also licensed by hing services are NOT clinical services and do not mily Coaching Sessions are intended to treat, nor are they
<b>USE OF SKYPE</b> : Coaching Sessions are available in person as well as via "Skype." By signing below, I understand and agree understand and agree that UCLA has no control over Skype, where technology. The UCLA Family Commons does not have operated the computers used by me to access Skype, and thus cannot go conducted via Skype. I acknowledge below my understanding Sessions via Skype carries an unquantifiable risk of potential second poligation to undertake prudent precautions to ensure that my confidential and that appropriate safeguards are implemented by Sessions (for example, that I ensure I am in a private area, and	ee that if I utilize Skype for Family Coaching Sessions, I hich is a third party provider of telecommunication tional control over either the services offered by Skype or uarantee the security of Family Coaching Sessions that the election to participate in Family Coaching ecurity breaches by unknown third parties. It is my sole conversations with the UCLA Coach on Skype are kept by me to prevent further disclosure of my Family Coaching
<b>WAIVER OF LIABILITY</b> : I hereby hold harmless and release, the University of California, its officers, employees, and agents, from liability from any and all claims resulting in injury, loss or d further expressly agree that the foregoing waiver is intended to State of California.	including The UCLA Family Commons and any Coach, lamage associated with my participation in the Program. I
<b>INDEMNIFICATION AND HOLD HARMLESS</b> : I agree to inder ("The Regents") harmless from any and all claims, actions, suits including attorneys' fees brought as a result of my involvement herein as the "Expenses").	s, procedures, costs, expenses, damages and liabilities,
<b>SEVERABILITY</b> : Participant agrees that if any portion of this D remaining portions shall, notwithstanding, continue in full legal f	•
NAME OF PARTICIPANT:	
SIGNATURE OF PARTICIPANT:	
<u>DATE</u> :	
PARTICIPATION OF MINORS: If you are signing as the legal of participating minors and your legal relationship to them:	guardian of participating minors, please identify the names
Names of minors:	
Legal relationship:	