

Assumption of Risk, Release from Liability, and Indemnification Form
(Parental Consent form for Minors Participating in Research or Clinical Activities)

This Assumption of Risk, Release from Liability, and Indemnification Form is required as part of an application for a minor to participate in an educational program at Yale University.

Individual laboratories vary in the inherent types of potential hazards present. While participating in this Program, your child may need to work with or around animals, biological materials, chemicals, or other potentially hazardous materials.

Yale provides safety training to all personnel who may work with or in the vicinity of potentially hazardous materials. Your child will be required to attend laboratory safety training and may also be required to attend additional training sessions, depending on the nature of his or her particular Program.

While participating in research or clinical activities at Yale, your child must reside with a parent or court-appointed guardian within daily commuting distance of Yale.

If you have further questions, please email ehsintegrator@yale.edu.

Section 1 – To Be Completed by Principal Investigator or Designee
Principal Investigator (PI) Name:
Yale Department Name:
Direct Supervisor Name (PI or Designee that provides direct supervision to child):
Direct Supervisor Cell Phone:
Briefly describe proposed educational, research and/or clinical activities in which the minor will participate. If applicable, include potentially hazardous materials the student will work with, as well as a specific description of any work involving animals that will be performed by the student:

Section 2 – To Be Completed by Parent or Court-Appointed Guardian

Name of Child:

Child's Birthdate (mm/dd/yyyy):

Child's Permanent Home Street Address:

City:

State:

Zip:

Medical Insurance while at Yale:

Name of Parent or Court-Appointed Guardian:

Relationship to Child of the Person Listed Above: (Check one): Parent Court-Appointed Guardian

Street Address where child will reside while at Yale (if different than permanent address):

City:

State:

Zip:

Parent or Court-Appointed Guardian Emergency Cell Phone:

This agreement ("Agreement") covers all aspects of my child's participation in the Program (described on Page 1). In this Agreement, "Yale" means Yale University, its trustees, officers, employees, trainees, students, volunteers, and agents.

1. 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, and I have read and understood the Program description above.

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

3. 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**.

4. 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**.

5. Governing Law and Jurisdiction. The laws of Connecticut shall govern and the courts of Connecticut shall interpret this Agreement.

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.

8. 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.

Signature of Parent/Court-Appointed Guardian:

Date: