

Liability Release Statement

I, _____ (Full Name) in consideration of the Intermountain Affiliate of College and University Residence Halls, Inc. and the University of Wyoming, allowing me to participate in the IACURH 2008 No Frills Conference hereby agree to the following: I release IACURH from damage and injuries which I may sustain as a result of my attendance at and travel to and from the IACURH Conference. I agree to protect, hold harmless, and indemnify the University of Wyoming and their officers, agents, and employees against all claims, suits, and liabilities of demands for injuries to any person and/or property growing out of my participation of the IACURH 2008 No Frills Conference. I specifically assume all risks associated with participation in the events of the conference and all else related to the injury from any cause, action, omission, or occurrence caused by the University of Wyoming or IACURH, their officers and agents, including acts of omission constituting negligence.

Signature of Delegate

Date

Signature of Witness

Date