BAYLOR CAMPUS RECREATION

Guest Registration Form ADULT - 18 and Up



One Bear Place, #97100 Waco, TX 76798-7100 (254) 710-7542

	Today's Date:			
GUEST INFORMATION				
Full Name:	Date of Birth:			
Gender:				
Home Address:				
City:				
Mobile Phone:				
E-mail Address:				
EMERGENCY CONTACT INFORMATION				
Name:				
Mobile Phone:	Work Phone:			
BAYLOR CARDHOLDER INFORMATION (GUEST SPONS	SOR)			
Name:	BU ID Number:			
	Department:			
Mobile Phone:				
SECTION TO BE COMPLETED BY CAMPUS REC STAFF				
Pass Type: Adult Day Pass	Driver's License No:State:			
Guest Fee: ☐ \$10.00 ☐ No Fee	e - Reason:			
Payment Method: Credit Card Cash				
	Staff Name:			

PARTICIPANT RELEASE ADULT

PARTICIPANT'S NAME:	nlasca	nrint	TEL NO.	
FARTICIFANT SNAME	piease	րլուլ	I LEL NO.	

BY SIGNING THIS DOCUMENT, YOU ARE WAIVING CERTAIN LEGAL RIGHTS, READ CAREFULLY BEFORE SIGNING.

ACTS, OMISSIONS, OR NEGLIGENCE

of Baylor University, its regents, officers, employees, students, or agents.

I FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS BAYLOR UNIVERSITY, ITS REGENTS, OFFICERS, EMPLOYEES, STUDENTS, AND AGENTS FROM ALL CLAIMS, DEMANDS, SUITS, CAUSES OF ACTION, OR JUDGMENTS WHICH I EVER HAD, NOW HAVE, OR MAY HAVE IN THE FUTURE OR WHICH OUR HEIRS, EXECUTORS, ADMINISTRATORS, OR ASSIGNS MAY HAVE, OR CLAIM TO HAVE AGAINST BAYLOR UNIVERSITY, ITS REGENTS, OFFICERS, EMPLOYEES, STUDENTS, OR AGENTS, ARISING OUT OF OR IN ANY WAY CONNECTED WITH THE CAMPUS RECREATION ACTIVITY, FOR ALL PERSONAL INJURIES, KNOWN OR UNKNOWN, PROPERTY DAMAGES, OR CLAIMS FOR WRONGFUL DEATH, CAUSED BY THE

ACTS, OMISSIONS, OR NEGLIGENCE

OF BAYLOR UNIVERSITY, ITS REGENTS, OFFICERS, EMPLOYEES, STUDENTS, OR AGENTS, AND ON BAYLOR'S BEHALF AND IN BAYLOR'S NAME, DEFEND AT MY OWN EXPENSE ANY SUCH CLAIMS, DEMANDS, SUITS, CAUSES OF ACTION, OR JUDGMENTS DESCRIBED ABOVE.

COVID-19 ADDENDUM: Participants are advised that participation in the EVENT during a time of pandemic carries an inherent risk of infection. Participants are advised to follow all recommendations of government authorities or Baylor policies for mitigating COVID-19 risks, including those regarding social distancing, wearing of masks, and isolation for vulnerable persons. By signing this agreement, Participant acknowledges and assumes, on the same terms as above, the risk of infection inherent in the event.

PHOTO RELEASE: I hereby grant to the RELEASED PARTIES the right to reproduce, use, exhibit, display, broadcast, distribute and create derivative works of university related photographs or videotaped images of PARTICIPANT for use in connection with the activities of the university or for promoting, publicizing or explaining the school or its activities. This grant includes, without limitation, the right to publish such images in the university's student newspaper, alumni magazine, publications on the university's website, and public relations/promotional materials. These images may appear in any of the wide variety of formats and media now available to the school and that may be available in the future, including but not limited to print, broadcast, videotape, CD-ROM and electronic/online media. All photos taken are without compensation to PARTICIPANT. All electronic or non-electronic negatives, positives, and prints are owned by the university.

I also agree to be responsible for any property damage or personal injuries that I may cause by intentional or negligent acts while participating in the CAMPUS RECREATION ACTIVITY. I have read and executed this document with full knowledge of its legal significance.

PARTICIPANT SIGNATURE

DATE

Rev: 01.20.22