

INDEMNITY AND AGREEMENT TO PAY MATHPATH

(please **print names** except for signature at end)

I, _____, parent/guardian of _____, have satisfied myself that the protocols for safety at MathPath 2012, as stated in the Precamp Briefing, represent due diligence on the part of MathPath. I therefore indemnify the MathPath organization and its staff and employees, against any and all legal claims by the parent/guardian on behalf of this student, provided that MathPath has not failed to institute that protocol in respect of which the injury or accident occurred. Further, I agree that in the event of occurrence of any legal claims relating to this student and MathPath, the claims shall be only on MathPath, not its staff or employees, and that the sum of liabilities payable individually and jointly by MathPath shall be limited to \$1 million in regard to this student.

I further agree that I am responsible for and will pay in full within 30 days all medical costs not covered by the medical insurance covering the student. I further agree to reimburse MathPath in full within 30 days for all charges from the host institution for lost or damaged items (e.g., room keys) that MathPath determines is the responsibility of my son, daughter or guardian child.

Date

Signature of parent/guardian

Must be signed and submitted by May 31, 2010