



4-H Activity Adult Release Form

for Participation in a 4-H Activity of UNH Cooperative Extension

_____ will be participating in
(Name)
_____ on _____
(Name of Activity) (Date)

Place a description of this activity and transportation methods here:

PLEASE RETURN THESE FORMS BY _____. YOU WILL BE
UNABLE TO PARTICIPATE WITHOUT THEM. (Date)

I understand the responsibilities, hazards, and dangers inherent in participation in this activity, including the transportation. I understand the Code of Conduct.

I hold harmless the University of New Hampshire, its trustees, officers, agents, employees, and volunteers from and against all claims, demands, actions, and causes of action for damages which may be sustained by myself or anyone else. This includes personal injury, death or property damage, whether or not the result of negligent acts or omissions on the part of the University of New Hampshire.

If my participation in the activity causes damage to the property of UNH Cooperative Extension, I agree to pay the University for such loss.

_____ Date _____ Signature of Adult Participant/Volunteer

Code of Conduct, and Medical Care and Treatment forms are attached.

Return forms to: