

**Ohlone Community College District Voluntary Activity,
Release and Indemnity Agreement**

I, _____, am over twenty-one years of age and have the
(parent/guardian)
right to execute this release. I am the parent or legal guardian of the minor herein named.

For myself, my heirs, executors, administrators and assigns, I hereby release the Ohlone Community College District from any and all claims, demands or liability of any kind, from whatever cause, without limitations, which may arise from damage, injury, illness, death or accident occurring during or by reason of participation by my **son/daughter**, _____, during the Ohlone College Raza Recruitment Day on 04/24/09. I further agree to hold harmless, defend and indemnify Agencies from any claims, demands or liability arising out of the participation by my son or daughter in the above-described activity, but not to the extent that such liability is due to the negligence of the Agencies.

I agree not to sue or prosecute any claim, demand or suit of any kind, directly or indirectly, in respect thereto.

I HAVE READ THIS ENTIRE FORM.

Signed _____, _____, 2009
(parent/guardian)

Name of Student/Minor Covered by this Release form:
