Texas Lutheran University

Office of Student Activities Waiver of Liability

1,	, am 18 years of age or older, and am executing this
(print name) waiver on my own behalf.	
waiver off my own benam.	(initials)
(nrint name)	, am not 18 years of age or older and the below listed
parent/guardian is executing this waiv	
	(initials)
Organization:	
As a condition of my/the studer activity	nt's participation in the following study, project, or
on	(date), I/the student understand and
with the student's travel to and from activity that the student, I, or the otherwise have against Texas Luthera	waiving any and all claims arising out of or in connection and/or the student's participation in this study, project, or student's other family members, heirs, or assigns may n University and/or its personnel (initials)
Signature of Student	Date
Signature of Parent/Guardian (if a	annlicable) Date