Note to parents/guardians of students: It will be necessary to complete accurately and sign this form in order for your child to participate in the Berkeley Math Circle in 1998-1999. Please, make copies for yourselves and give the original to the student to take to the first meeting of the Math Circle. The Berkeley Math Circle (BMC), to start in September 1998, is going to be coached by instructors from University of California, University of San Francisco, and Mathematical Sciences Research Institute. By registering for participation in BMC in 1998-1999 all parents and students are agreeing to uphold the tenets in this document.

I understand that there are risks and dangers inherent in participating and/or receiving instruction in the Berkeley Math Circle (BMC). I also understand that in order to be allowed to participate and/or receive instruction in BMC I must give up my rights to hold The Regents of the University of California, University of San Francisco, Mathematical Sciences Research Institute and BMC staff liable for any injury or damage which I may suffer while participating and/or receiving instruction in BMC.

Knowing this, and in consideration of being permitted to participate and/or receive instruction in BMC, I hereby voluntarily release The Regents of the University of California, University of San Francisco, Mathematical Sciences Research Institute and BMC staff from any and all liability resulting from or arising out of my participation and/or receipt of instruction in BMC.

I understand that students participating in any of the sessions and activities of the BMC agree to abide by all decisions made by and regulations imposed by BMC staff and BMC designated chaperones. Students who do not do so, or who fail to observe reasonable rules of good conduct, may have their participation terminated.

I understand that The Regents of the University of California, University of San Francisco, Mathematical Sciences Research Institute and BMC staff make no warranties of any sort concerning the safety of the students during travel to and from the sessions of the BMC. Although directions to the site of the BMC sessions shall be provided, the transportation to and from this site is the responsibility of the students alone.

I understand that The Regents of the University of California, University of San Francisco, Mathematical Sciences Research Institute and BMC staff make no warranties of any sort concerning the security of student property or possessions. The belongings of each student are the responsibility of that student alone.

I understand and agree that I am releasing not only The Regents of the University of California, University of San Francisco, Mathematical Sciences Research Institute, and Berkeley Math Circle, but also their officers, agents, and employees of those entities.

I understand and agree that this Consent Form will have the effect of releasing, discharging, waiving and forever relinquishing any and all actions or causes of action that I may have or have had, whether past, present or future, whether known or unknown, and whether anticipated or unanticipated by me, arising out of my participation and/or receipt of instruction in BMC except for the acts or omissions of The Regents of the University of California, University of San Francisco, or Mathematical Sciences Research Institute, their officers, agents or employees which are found to be negligent by a court of competent jurisdiction.
I understand and agree that this Consent Form applies to personal injury, property damage, or wrongful death which I may suffer, even if caused by the acts or omissions of others.

I understand and agree that by signing this Consent Form, I am assuming full responsibility for any and all risk of death or personal injury or property damage suffered by me while participating and/or receiving instruction in BMC.

I understand and agree that this Consent Form will be binding on me, my spouse, my heirs, my personal representatives, my assigns, my children and any guardian ad litem for said children.

I understand and agree that by signing this Consent Form, I am agreeing to release, indemnify and hold The Regents of the University of California, University of San Francisco, Mathematical Sciences Research Institute, Berkeley Math Circle and their officers, agents, and employees harmless from any and all liability or costs, including attorneys fees, associated with or arising from my participation and/or receipt of instruction in BMC.

I understand and agree that if I am signing this Consent Form on behalf of my minor child, that I will be giving up the same rights for said minor as I would be giving up if I signed this document on my own behalf.

_________________________  __________________________
Date                      Student Name in Full

_________________________
Student Signature

_________________________  __________________________
Parent or Legal Guardian Name Parent or Legal Guardian Name

I or We, ___________________________
the parent(s) of  __________________________
Student Name in Full

have read, understood and agree with the above Consent Form concerning my child’s participation in the Berkeley Math Circle in 1998–1999.

_________________________  __________________________
Date                      Parent or Legal Guardian Signature

_________________________  __________________________
Date                      Parent or Legal Guardian Signature