

IMRI Facility Waiver/Release Agreement

All non-UCI users must sign this form prior to entering the IMRI Facilities.

I understand that there are risks and dangers inherent in participating in work in the IMRI Facilities. I also understand that in order to be allowed to work in the IMIR Facilities, I must give up my rights to hold The Regents of the University of California liable for any injury or damage which I may suffer while working in the IMRI Facilities, except for the acts or omissions of The Regents of the University of California, its officers, agents or employees which are found to be negligent by a court of competent jurisdiction.

Knowing this, and in consideration of being permitted to work in the IMRI Facilities on the University of California Irvine, I hereby voluntarily release The Regents of the University from any and all liability resulting from or arising out of my work in the IMRI Facilities on the University of California, Irvine.

I understand and agree that I am releasing not only the entities set forth in the paragraph above, but also the officers, agents, and employees of those entities.

I understand and agree that this Waiver/Release 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 work in the IMRI Facilities, except for the acts or omissions of The Regents of the University of California, its officers, agents or employees which are found to be negligent by a court of competent jurisdiction.

I understand and agree that this Waiver/Release 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 Waiver/Release, I am assuming full responsibility for any and all risk of death or personal injury or property damage suffered by me while working in the IMRI Facilities.

I understand and agree that this Waiver/Release will be binding on me, my spouse, my heirs, my personal representatives, my assignees, my children and my guardian ad litem for said children.

I understand and agree that by signing this Waiver/Release, I am agreeing to release, indemnify and hold The Regents of the University of California, its officers, agents or employees harmless from any and all liability or costs, including attorney fees, associated with or arising from my work in the IMRI Facilities.

I acknowledge that this Waiver/Release Agreement was read to me in my native language and that I understand the words and language contained herein. I have been fully advised of the potential dangers incidental to work in the IMRI Facilities.

Print name:

Sign name:

Institution name: _____

Dated: _____