## Release and Waiver of Liability, Assumption of Risk, and Photograph Release Agreement

I,	("Participant"), voluntarily elect to participate in the	
	("Event") conducted b	by the California State Senate
("State") in coordination with the office of Senator		. The Event
is held at	on	In consideration for being
permitted to participate in the	ne Event, I hereby acknowledge a	and agree to the following:

Release and Waiver of Liability: I, on behalf of myself and my personal representatives, heirs, executors, administrators, agents, and assigns, hereby release, waive, discharge, and covenant not to sue the State, or its officers, members, employees, agents, and any other entity or individual acting on behalf of the State (collectively, "Releasees"), for any liability, claim, action, loss, damage, cost, or expense whatsoever arising out of or related to any damage or injury, including death, that may occur as a result of my participation in the Event, including any damage or injury that may occur during my travel to and from sites at which the Event is conducted, regardless of whether the damage or injury is caused by the negligence of the Releasees.

Assumption of Risk: I assume full responsibility for my participation in the Event and voluntarily elect to participate. I understand that there are potential risks incidental to my participation in the Event, some of which may be dangerous and may expose me to the risk of property damage, personal injury, or even death. These potential risks may occur at any time during my travel to or from, or attendance at, any meeting, activity, or event conducted as part of the Event, including during my travel to or from the Event. I knowingly and voluntarily assume all potential risks, both known and unknown, regardless of whether the risk is caused by the negligence of the Releasees.

**Photograph Release**: I grant the State permission to take photographs of me and to record me in any audio, audio-visual, or other media ("Photograph") in connection with my participation in the Event. I grant the State the nonexclusive, irrevocable right to use my name, voice, likeness, or image, as captured on or in the Photograph, for any purpose and in any form in connection with the Event or any similar internship Event.

Choice of Law/Severability: This Agreement shall be construed in accordance with the law of the State of California and it is intended to be as broad and inclusive as is permitted by law. If any portion of it is held invalid, the balance shall continue in full force and effect.

Participant's name:

I have read this Agreement and fully understand and agree to its terms. I am aware that this Agreement includes a release and waiver of liability, an assumption of the risks, and a photograph release. I understand I have given up substantial legal rights by signing this Agreement. I sign freely and voluntarily without any inducement. I warrant that I am at least 18 years of age and fully competent to sign this Agreement, or, if not, that I have secured below the signature of my parent or legal guardian.

Signature:	Date:	
If Participant is under 18 years of age or under legal guardianship, the following section must be completed by his or her parent or legal guardian:		
I certify that I am the parent or legal guardian of fully understand and agree to its terms. By signing Participant, (a) release, waive, discharge, and compotential risks of the Participant's participation in photograph and record the Participant and use the in connection with the Event or a similar internsh Agreement I have given up substantial legal right and voluntarily without any inducement. I understand acts of Participant as described in this Agree bound by the terms of this Agreement.	ng this Agreement, I, for myself and the venant not to sue the Releasees; (b) assume all in the Event; and (c) grant the State the right to be Participant's name, voice, likeness, or image hip Event. I understand that by signing this ts for myself and the Participant. I sign it freely stand that I am responsible for the obligations	
Parent or legal guardian's name:		
Signature:	Date:	