

# UNM THEATER AND DANCE DEPARTMENT

**PLEASE NOTE:** IF you have already completed this form in another Theatre and Dance class THIS semester, you do NOT need to complete it again.

## ACKNOWLEDGEMENT OF RISK FACTORS

PLEASE PRINT-

I, \_\_\_\_\_, understand that the University of New Mexico  
LAST NAME, FIRST NAME

**DOES NOT** provide insurance coverage for medical care that I may need because of participation in courses, programs, projects, artistic productions, and other activities sponsored by the Department of Theatre and Dance.

I further understand that there are certain risks and hazards that may arise in the course of these activities, including accidents or illness in remote locations. I hereby assume the inherent risks and hazards of any of these activities.

I acknowledge that any claims for damages against the University of New Mexico or its officers or employees for death, personal injury or property damage which may occur as a result of my participation in any of the above-mentioned activities would be governed by the New Mexico Tort Claims Act, which imposes limitations on the recovery of damages from institutions and their public employees.

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Signature

TODAY'S Date

SUMMER 2014