

VIVA MUN 2024 Delegate Release of Liability Form

This Liability Release Form is required to be signed and either emailed or submitted as a hard copy at the outset of the event. Additionally, it must be signed by a parent/guardian. Any student without this release completed will not be allowed to participate in any conference-related activities.

Participant Information

Participant's Name: _____

School/Institution: _____

Liability and Indemnification

I, _____, the undersigned participant, by signing below agree to indemnify and hold free from blame VIVA MUN 2024 including its Secretary-General Mr Ranveer Singh and VIVA The School together with their directors, employees, volunteers and agents for all claims obligations liabilities loss (including attorneys' fees) costs or expenses arising out of travelling to, participating in or returning from VIVA MUN 2024. I will fully bear all charges as well as damages that may occur while using the provided accommodation.

Code of Conduct and Compliance

I comprehend and accept to be bound by the VIVA MUN 2024 code of conduct, As well as statutes of Andhra Pradesh, Republic of India or any other applicable legislation or standards at the place where the conference will be held. I also agree with any other rules provided by VIVA MUN 2024 before and during the conference that are available in the conference handbook and given by faculty advisors.

Media Consent

I consent to have photographs taken, videos made of me, or even interviews done on me by VIVA MUN 2024 for their use as they may see fit.

Refund Policy

It is my understanding that refunds or any other compensation will only be given if/as stated in VIVA MUN policy. I admit that I can be expelled from this meeting if I violate this agreement. Also no reimbursement will be granted to registered participants who fail to attend conferences due to various reasons such as bad weather, delays in transportation services and sickness among others.

Acknowledgement and Consent

I have read and understand the terms of this Liability Release Form. By affixing my signature here, I confirm that I am aware of these conditions.

Participant's Signature: _____ Date: _____

Parent/Guardian's Name: _____ Date: _____

Parent/Guardian's Signature: _____ Date: _____