

AGREEMENT AND RELEASE OF LIABILITY

By enrolling in Clinical Mentorship Course(s), I certify that I am cognizant of all the dangers inherent in the veterinary medical profession and of the basic safety rules for activities connected therewith.

I understand that it is not the purpose of Purdue University, The Trustees of Purdue University or its officers, agents, or employees to serve as guardians of my safety while enrolled in Clinical Mentorship course(s). I further understand and agree that neither Purdue University, The Trustees of Purdue University nor its officers, agents or employees, may be held liable in any way for any occurrence in connection with my participation in Clinical Mentorship course(s), which may result in injury, death or other damages to me or my family, heirs or assigns.

In consideration of being enrolled in Clinical Mentorship course(s), I hereby personally assume all risks in connection with them, and I further release and discharge Purdue University, the Trustees of Purdue University, and to the same extent as if expressly named herein, its officers, agents and employees (the "Released Parties"), for any injury or damage that may befall me while I am enrolled as a student in Clinical Mentorship course(s), including all risks connected therewith, whether foreseen or unforeseen; and further to save and hold harmless the Released Parties from any claim by me, or my family, estate, heirs or assigns, arising out of my enrollment and participation in Clinical Mentorship course(s).

I further state that I am of lawful age and legally competent to sign this affirmation and release, and I understand that the terms herein are contractual and not a mere recital.