

## **ASCE Texas Civil Engineering Conference (CECON)**

### **Terms and Conditions | Waiver of Liability**

#### **Terms and Conditions**

- I agree to comply with [ASCE's Code of Conduct](#) at all times in connection with my participation in the 2026 ASCE Texas Civil Engineering Conference (CECON).
- I agree that ASCE Texas Section and co-host(s) may use for publicity, advertising, or promotional purposes, my name and any photographs, videotapes, films, recordings, and other images of me participating in CECON and official affiliated activities, without compensation, obligation, or liability to me.

#### **Waiver of Liability**

- I understand my participation in the 2026 ASCE Texas Civil Engineering Conference (CECON), or in any specific event, is strictly voluntary and that I am fully responsible for my own conduct, well-being, and safety including, but not limited to, determining my level of fitness to take part in any such event or activity.
- I am fully aware of the risks inherent in my participation in large group activities, public & private events, and convention/conferences, which may include but are not limited to injuries or loss caused by physical activity; use of tools, equipment, or machinery; hazardous weather, land, water, environmental, or structural conditions; actions of myself or other participants; slips, falls, collisions, or any other accident; hazards associated with wildlife, insects, bacteria, or infectious disease; or any other risk or danger.
- In consideration of my participation in any or all of the 2026 ASCE Texas Civil Engineering Conference, also known as CECON (the "Event(s)"), to the fullest extent permitted by law: I hereby release the American Society of Civil Engineers, any co-hosts, and their respective employees, officers, affiliates, agents or representatives (hereafter, "Released Parties"), from, and waive any and all claims which I may have against them at any time with respect to, liability arising from property damage or personal injury, including without limitation permanent disability, paralysis, or loss of life, which I may suffer or incur in participating in or traveling to or from the Event(s).
- I acknowledge that an inherent risk of exposure to communicable or infectious disease, including but not limited to COVID-19, exists anywhere other people are present, and even precautionary measures such as masking and social distancing cannot eliminate this risk. I waive any and all liability against the Released Parties for any loss, damages, or suffering I may incur related to exposure to communicable or infectious diseases.
- I consent to medical treatment in the event of injury, accident and/or illness during the Event, but I understand that the Released Parties undertake no obligation to do so and I hereby waive, release, and covenant not to sue Released Parties from any and all losses relating to deciding to seek, or not seek, medical treatment. I understand and agree that I will accept responsibility for any medical bills, including co-payments and deductibles.
- I understand and agree that I am releasing to the maximum extent permitted by law any right to make any claim, now or in the future, for damages or any other relief against a Released Party even if the claim arises from an injury or damage caused, or alleged to have been caused, by the negligence of such Released Party.
- In the event that, while participating in the Event, I cause harm to another person or another person's property, I accept sole responsibility for my actions.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. BY CLICKING THE BOX, I SIGNIFY THAT I AM AWARE THAT THIS IS A RELEASE OF LIABILITY, A PROMISE NOT TO SUE, AND A CONTRACT BETWEEN ME AND THE RELEASED PARTIES. I AGREE TO THIS FREELY AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW. THE FOREGOING RELEASE, WAIVER, AND AGREEMENT, SHALL BE BINDING UPON ME, AND MY HEIRS, EXECUTORS, PERSONAL REPRESENTATIVES, AND ASSIGNS.

By signing below, I certify that I am the participant\* named on this registration form and that I have read, understood, and agree to these terms. [Email form to implanners@sbcglobal.net](mailto:Email form to implanners@sbcglobal.net)

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_  
Print Legibly

DATE:-----

*\*If a participant is under 18 years of age, a copy signed by a parent/guardian, will be required.  
Please contact [office@texasce.org](mailto:office@texasce.org) for a hard copy or PDF version of this form.*