Avon free public library

Due to the unpredictable nature of the human response to virtual reality (VR) all participants in any Avon Free Public Library (AFPL) program utilizing the library's HTC VIVE system and its components, or any other of its VR equipment, are required to sign this Waiver of Liability. VR usage is limited to adults, and children under the age of 18 who are in the seventh grade or above.

## **Virtual Reality Waiver of Liability**

I am using the VR equipment voluntarily. I have been given a demonstration of its use and I recognize and understand that its use involves certain risks which include, but are not limited to:

- <u>Photosensitive Seizures</u>: Like other products that produce visual effects (including light flashes), VR can cause minor nausea and motion illness. It may trigger epileptic seizures, seizures, fainting, or severe dizziness, even in people having no history of these conditions.
- <u>Physical and Psychological Effects</u>: Content viewed using the VR equipment can be intense, immersive, and appear very life-like and may cause the brain and body to react accordingly.
- <u>I understand that I should not use the VR equipment if I have</u>: Motion sickness, impaired balance, photosensitive seizures, heart, orthopedic or other medical conditions, or during pregnancy or possible pregnancy.

## I will discontinue the use of the VR equipment if I feel any discomfort whatsoever.

I acknowledge that I have read and understood the terms of this Waiver of Liability Agreement. I shall not hold the AFPL or the Town of Avon responsible for any claims for liability, damage, loss or injuries of any nature that may arise out of the use of the HTC VIVE virtual reality system. I further agree to indemnify and hold the AFPL (including its directors, officers, employees, and representatives) and the Town of Avon harmless from any and all claims, losses, damages, costs, penalties, settlements, fines, and expenses that the Library or Town may incur. In the event that any damage to the VR equipment occurs as a result of my use, I acknowledge that I could be held liable for that damage. I am aware that this is a release of liability and I sign it of my own free will.

Participant Name (please print): \_\_\_\_\_\_

Participant Signature: \_\_\_\_\_

*I* am the parent or legal guardian of the minor named above and thereby have the legal right to consent to the terms and conditions of this Waiver of Liability.

Parent or Legal Guardian (please print): \_\_\_\_\_

Parent or Legal Guardian Signature:\_\_\_\_\_

Date: \_\_\_\_\_