BroncoFusion Ticket Directions
For students under 18 years of age on or after 8/1/24

All fall 2024 students turning 18 years old on or after August 1, 2024, must purchase a ticket in person at the Bronco Recreation and Intramural Complex (BRIC, Bldg. 42) front desk. Please follow these directions to secure your ticket for BroncoFusion.

**Step 1:** Print and have a parent or guardian sign the ASI Events Waiver.

**Step 2:** Return the signed waiver to the front desk at the BRIC (Bldg. 42), along with your ticket payment.

**BRIC Summer Hours:**
- 8/1/24-8/2/24: 8:00 a.m. - 8:00 p.m.
- 8/3/24-8/4/24: CLOSED
- 8/5/24-8/9/24: 8:00 a.m. - 8:00 p.m.
- 8/10/24-8/18/24: CLOSED
- 8/19/24-8/22/24: 6:00 a.m. - Midnight
- 8/23/24: 6:00 a.m. - 2:00 p.m. (In-Person Ticket Sales Close at 1:30 p.m.)

**Step 3:** The Member Services Attendant at the front desk will handle your transaction. Please note that we only accept credit and debit card transactions with a physical card. For security purposes, the name on the card must match the name on the photo identification. Students wishing to use a parent or guardian’s credit card should consider the following options:

- Perform the transaction with the parent/guardian present.
- Ask the parent/guardian to load $10 into the student’s debit card.

**Additional Notices:**

- If you turn 18 years old between 8/1/24-8/23/24, you may sign the waiver without a parent or guardian’s signature on or after your 18th birthday. Proof of age must be shown at the time of in-person transaction.
- Worried about tickets selling out? ASI will be reserving 500 tickets for those under 18 years of age until 8/22/24 at 11:59 p.m. After, any remaining reserved tickets will be released.
RELEASE OF LIABILITY, PROMISE NOT TO SUE, ASSUMPTION OF RISK AND AGREEMENT TO PAY CLAIMS

Activity: BroncoFusion 2024
Activity Date(s) and Time(s): 8/23/24
Activity Location(s): Bronco Commons

In consideration for being allowed to participate in this Activity, on behalf of myself and my next of kin, heirs and representatives, I release from all liability and promise not to sue the State of California, the Trustees of The California State University, California State University, Cal Poly Pomona and their employees, officers, directors, volunteers and agents (collectively “University”) and Cal Poly Pomona Foundation, Inc.; Cal Poly Pomona Associated Students Inc.; Cal Poly Pomona Philanthropic Foundation; and their employees, officers, directors, volunteers and agents (collectively "Auxiliaries") from any and all claims, including claims of the University’s and/or Auxiliaries’ negligence, resulting in any physical or psychological injury (including paralysis and death), illness, property damage, or economic or emotional loss I may suffer because of my participation in this Activity, including travel to, from and during the Activity.

I am voluntarily participating in this Activity. I am aware of the risks associated with traveling to/from and participating in this Activity, which include but are not limited to physical or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, death and/or property damage. I understand that these injuries or outcomes may arise from my own or other’s actions, inaction, or negligence; conditions related to travel; or the condition of the Activity location(s). Nonetheless, I assume all related risks, both known or unknown to me, of my participation in this Activity, including travel to, from and during the Activity.

I agree to hold the University and/or Auxiliaries harmless from any and all claims, including attorney’s fees or damage to my personal property, that may occur as a result of my participation in this Activity, including travel to, from and during the Activity. If the University and/or Auxiliaries incurs any of these types of expenses, I agree to reimburse the University and/or Auxiliaries. If I need medical treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I am 18 years or older. I understand the legal consequences of signing this document, including (a) releasing the University and/or Auxiliaries from all liability, (b) promising not to sue the University and/or Auxiliaries, (c) and assuming all risks of participating in this Activity, including travel to, from and during the Activity.

I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms.

Page 1 of 2
6/2022
I understand and agree that while participating in this activity, I remain subject to the rules, regulations, and policies of the activity and Cal Poly Pomona University, as stated in Title 5 of the California Code of Regulations, Section 41301, Standards for Student Conduct.

I have been informed and understand there remains a risk of exposure to COVID-19 and other infectious diseases. I understand that regardless of any precautions taken, an inherent risk of exposure to COVID-19 and other infectious diseases will exist.

I have read this document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

Participant Signature: _______________________________________

Participant Name (print):_______________________________________  Date: ____________

If Participant is under 18 years of age

I am the parent or legal conservator/guardian of the Participant. I understand the legal consequences of signing this document, including (a) releasing the University and/or Auxiliaries from all liability on my and the Participant’s behalf, (b) promising not to sue on my and the Participant’s behalf, (c) and assuming all risks of the Participant’s participation in this Activity, including travel to, from and during the Activity. I allow Participant to participate in this Activity. I understand that I am responsible for the obligations and acts of Participant as described in this document. I agree to be bound by the terms of this document.

I have read this two-page document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

______________________________
Signature of Minor Participant’s Parent/Guardian

______________________________
Name of Minor Participant’s Parent/Guardian (print)  Date

Minor Participant’s Name
VISUAL/AUDIO IMAGE RELEASE FORM

Event/Purpose: BroncoFusion 2024

I hereby grant permission to Associated Students Inc. (ASI), its employees and agents, to take and use visual/audio images of me. Visual/audio images are any type of recording, including photographs, digital images, drawings, renderings, voices, sounds, video recordings, audio clips or accompanying written descriptions. I agree that ASI owns the images and all rights related to them. ASI has the right to edit, revise, abridge, censor and condense the material to adhere to ASI’s posting policies and for space reasons, and to reuse the material for promotional and advertising purposes. The images may be used in any manner or media without notifying me, such as the ASI websites, publications, promotions, broadcasts, YouTube, advertisements, posters, theater slides and all social media platforms. I grant ASI the right to use my name and/or likeness in publications and in any other media whether now known or hereafter existing. I waive any right to inspect or approve the finished images or any printed or electronic matter that may be used with them. I understand that ASI will not pay me, and I agree to make no monetary or other claim relating to ASI’s use of the material.

I release ASI and its employees and agents, including any firm authorized to publish and/or distribute a finished product containing the images, from any claims, damages or liability which I may ever have in connection with the taking of use of the images or printed material used with the images.

I am at least 18 years of age and competent to sign this release. I have read this release before signing, I understand its contents, and I freely accept the terms.

Printed Name

Date

Signature

Telephone or email address

Parent or Guardian if under 18 years of age