

Virtual Reality (VR) and
Augmented Reality (AR)
Release of Liability



Bear River

Band

Library

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For the purpose of this waiver, the terms VR and AR shall be used interchangeably.

Due to the unpredictable nature of the human response to virtual reality (dizziness, nausea, seizures, fear of heights, bumping into objects, etc.), we require all participants to sign this waiver releasing the Bear River Band Library from any liability regarding your (or your child/dependent/minor's) use of the Oculus Rift, HTC Vive, and/or any of the Library's VR equipment.

Oculus VR, LLC. and PlayStation VR, does NOT recommend that children under the age of 13 use the VR head- sets. A list and description of risks associated with the use of VR is available at <http://www.brb-nsn.gov/>

Please **stop use** of the VR equipment if you feel **any discomfort whatsoever**.

BY USING THE LIBRARY'S VR HEADSET, YOU ARE INDICATING YOUR ACCEPTANCE OF THE TERMS AND CONDITIONS OF THIS AGREEMENT.

I (or my child/dependent/minor) wish to use the Library's VR headset. I recognize and understand that the use of a VR headset involves certain risks.

- 1) I (or my child/dependent/minor) am using the VR equipment voluntarily;
- 2) I assume all of the physical, psychological, and financial risks (please see attached document for break down) associated with use of VR equipment;
- 3) By signing, I acknowledge that I have read and understood all of the terms of this release form and that I am voluntarily giving up substantial legal rights, including the right to sue the Bear River Band Library or its employees;
- 4) [If the headset is being used by child/dependent/minor] I am the parent or legal guardian of the minor named below. I have the legal right to consent to and, by signing below, I hereby do consent to the terms and conditions of this Release of Liability.

I understand that I must sign this Release of Liability in order to use any of the Library's VR equipment.

Participant name (please print) _____

Parent/legal guardian name (please print) _____

Participant (or parent/legal guardian)
phone number _____

Tribal roll number _____

Participant Library card number (optional) _____

Participant's age _____

Participant (or parent/legal guardian) signature _____

Date _____