THIS /	AGREE	MENT made under the laws of the Province of Prin	ce Edward Island, Canada.
BETW	EEN:	The University of Prince Edward Island whose head office address is:	
		550 University Avenue Charlottetown, PEI C1A 4P3	(called " <b>UPEI</b> )
AND:		whose address is:	-
			(called the "Invitee")
AND:		whose address is:	<del>-</del>
			(called the "Supervisor")
WHER	REAS:		
(a)		wishes to grant the Invitee access to UPEI Pre-	mises; this agreement sets out the understanding with
(b)	maint		nfidential Information") of commercial value that UPEI confidentiality of that information, but may make available
The Pa	arties a	gree as follows:	ESS
<b>1.</b> 1	(calle	ect to the terms of this Agreement, UPEI hereby grad the "Premises") for a period expected to be appromay in its discretion modify the period.	nts the Invitee access to UPEI's Building to to
		2.0 INVITEE'	S STATUS
<b>2.</b> 1		nvitee acknowledges that the Invitee's presence onship between UPEI and the Invitee.	n the Premises does not create an employer-employee
		3.0 CONFIDEN	ITIALITY
3.1		e: The Invitee acknowledges that all information of UPEI, is Confidential Information, regardless of whe	f a scientific or technical nature which the Invitee obtains ther:
	(a)	it was in documents with or without indications o	confidentiality;
	(b)	anything was said about confidentiality at the time	e of disclosure; or
	(c)	it was disclosed intentially or inadvertently;	
		s the nature of the information or the circumstan	nces in which it was disclosed clearly indicate that the iting that the information is not confidential.

- **3.2** Confirmation of Confidentiality: If in doubt about the confidentiality of any information, the Invitee may make an inquiry to the Supervisor, and must assume that the information is confidential unless a written confirmation from the Supervisor indicates otherwise.
- **3.3 Restriction:** The Invitee shall not, for the duration stated below, directly or indirectly, without specific permission from UPEI:
  - (a) use any Confidential Information; or
  - (b) publish or disclose any Confidential Information to any person or entity.
- **3.4 Duration**: The obligations of confidentiality and non-use in this Agreement apply to each item of Confidential Information until <u>five (5)</u> years after that item of information became known to the Invitee. Information is assumed to have become known on the last day the Invitee is at the Participating Institute, unless the Invitee can provide evidence of an earlier date.

#### 4.0 COMPLIANCE

- 4.1 The Invitee shall comply with regulations and policies UPEI may adopt from time to time to address access to the Premises and activities thereon. Without limiting the generality of the foregoing, the Invitee shall comply with policies and regulations addressing:
  - (a) protection and confidential information;
  - (b) research ethics/animal care;
  - (c) code of conduct in UPEI premises;
  - (d) safety and health of UPEI employees, the Invitee and others; and
  - (e) security and emergency procedures.

These policies are available through www.upei.ca/policies.

## 5.0 WAIVER OF LIABILITY

5.1 To the extent permitted by law, the Invitee waives the right to bring any legal proceeding, including an action for damages based on negligence, against UPEI, its officers, agents or employees.

## 6.0 INSURANCE

**6.1** The parties acknowledge that UPEI carries no insurance on behalf of the Invitee.

### 7.0 INDEMNITY

7.1 The Invitee shall indemnify and save harmless UPEI from and against all claims, demands, actions, suits or other proceedings arising out of the presence of the Invitee at UPEI.

# 8.0 TERMINATION

**8.1** Any breach of this Agreement is grounds for UPEI to immediately terminate the Invitee's access to the Premises, as well as to seek other legal remedies, restraints and compensation.

Date:	
	(signature)
	(print name and title)
SIGNED by the Invitee's Parent or Guardian, if applicable:	
Date:	
<del>,                                    </del>	(signature)
	(print name and title)
SIGNED by the Department Chair at	
	have read the foregoing and agree to discharge my duties as and conditions outlined herein.
Department Chair in accordance with the terms	s and conditions outlined herein.
Department Chair in accordance with the terms  Date:	(Signature)  (Print name and title)
Department Chair in accordance with the terms  Date:  BIGNED by the Dean (or designate) at  By signing below, I hereby confirm that I have	(Signature)  (Print name and title)
Department Chair in accordance with the terms  Date:  BIGNED by the Dean (or designate) at  By signing below, I hereby confirm that I have	(Signature)  (Print name and title)
Department Chair in accordance with the terms  Date:  SIGNED by the Dean (or designate) at	(Signature)  (Print name and title)  re read the foregoing and acknowledge that I am aware that this

UNIVERSITY OF PRINCE EDWARD ISLAND