

RELEASE FROM LIABILITY

To be signed by all participants who are 19 years of age or older. If participant is under 19 years of age, participant’s parent or guardian (hereafter “Guardian”) must sign this release. Participant/Guardian must sign in the presence of one (1) witness.

TO THE UNIVERSITY OF SOUTH ALABAMA:

Participant: _____ Activity and Date: _____

Participant/Guardian understands that participation in the above-referenced Activity carries inherent risks. Those risks may include, but are not limited to, scrapes, cuts, bruises, sprains, strains, broken bones, concussion, overheating, hypothermia, bites, stings, allergic reactions, dehydration, sunburn, animal attacks, environmental and weather related hazards, travel related accidents, paralysis, and death. These risks may result from the use of equipment or facilities, from the Activity itself, from the acts of others, or from the unavailability of emergency medical care. Participant/Guardian understands that although the University of South Alabama (hereafter “USA”) has taken reasonable steps to provide Participant with appropriate equipment and skilled trip leaders, certain risks cannot be eliminated. Participant/Guardian acknowledges that participation in this Activity is voluntary, and that he or she has had the opportunity to ask questions to his or her satisfaction regarding this Activity and associated risks. Participant/Guardian has made the decision willingly and without the influence of others for Participant to participate in the Activity and to assume the associated risks.

In consideration of USA and the Department of Campus Recreation permitting the Participant the opportunity to participate in this Activity, Participant/Guardian, in full recognition and appreciation of any and all risks, hazards or dangers inherent in this Activity, including transportation to, from, and during the Activity, to which Participant may be exposed, do hereby agree to assume all of the risks and responsibilities surrounding participation in such Activity. Participant/Guardian understand that the Department of Campus Recreation and USA, its trustees, officers, agents, servants, employees, and volunteers, assume and accept no liability for personal injury or loss of life or damage to personal property.

Further, Participant/Guardian, for him/herself and his/her heirs and personal representatives, does hereby defend, hold harmless and indemnify, release and forever discharge the Department of Campus Recreation and USA, its trustees, officers, agents, servants, employees, and volunteers from and against any and all claims, demands and actions or causes of action on account of or resulting from participation in the Activity.

Participant/Guardian attests and verifies that Participant has no physical limitations that would prevent safe participation in this Activity. Participant/Guardian understands that Participant **IS NOT** covered by any University liability insurance.

Participant agrees to follow posted signs and published rules as well as instructions of USA personnel or any other official associated with the Activity named above. Participant/Guardian acknowledges that University policy prohibits the possession or consumption of alcohol at any time during the Activity.

IN WITNESS WHEREOF, I have caused this release to be signed this _____ day of _____, 20____.

SIGNATURE OF PARTICIPANT (if 19 or over)
OR
PARENT/GUARDIAN (if participant is under 19)

SIGNATURE OF WITNESS

PRINTED NAME OF WITNESS

PRINTED NAME OF PARENT/GUARDIAN
(if participant is under 19)