

## RECREATIONAL ACTIVITIES AND INTRAMURAL SPORTS

Many recreational activities and athletic programs involve substantial risks of bodily injury, property damage and other dangers associated with participation in such activities. Dangers related to such activities include but are not limited to: hypothermia, broken bones, strains, sprains, bruises, drowning, concussion, heart attack, and heat exhaustion. Each participant in such activities should realize that there are risks, hazards and dangers inherent in such activities and in the training and preparation for and travel to and from such activities. It is the sole responsibility of each participant to participate only in those activities for which h/she has the prerequisite skills, qualifications, preparations, and training. The undersigned acknowledges that Georgia Southwestern State University does not warrant or guarantee any respect the competency or mental or physical condition of any trip leader, vehicle driver, or individual participant in any athletic or recreational activity.

**All participants in recreational activities and athletic programs will be required to sign the Release, Waiver of Liability and Covenant Not to Sue from below.**

*I acknowledge that I am solely responsible for any hospital or other costs arising out of any bodily injury or property damage sustained through my participation in such voluntary athletic or recreational activities. In this regard, I certify that I am covered by a 24-Hour health and accident insurance policy.*

NAME OF INSURANCE COMPANY: \_\_\_\_\_

*I have received a copy of this Notice, which I have read and understand. I accept and assume all risks, hazards and dangers involved in any such activities in which I may elect to participate, including the training and preparation for and travel to and from the site of such activities.*

### **RELEASE, WAIVER OF LIABILITY AND COVENANT NOT TO SUE (READ CAREFULLY BEFORE SIGNING!!!)**

The undersigned hereby acknowledges that participation in athletic programs and recreational activities involves inherent risks of physical injury, illness or loss of personal property and assumes all such risks. The undersigned hereby agrees that for the consideration of Georgia Southwestern State University allowing the undersigned to participate in athletic activities and in connection therewith, making available to the undersigned for his/her use while participating in such programs or activities, certain equipment, facilities, grounds, or personnel of the institution, the undersigned participant does hereby waive liability, release and forever, discharge the Institution and the Board of Regents of the University System of Georgia, its members individually and its officers, agents and employees of and from any and all claims, demands, rights and causes of action of whatever kind of nature, arising out of all known and unknown, foreseen and unforeseen bodily and personal injuries, damage to property and the consequences thereof, including death, resulting from my voluntary participation in or in any way connected with such recreational programs and athletic activities.

I further covenant and agree that for the consideration stated above I will not sue the Institution, the Board of Regents of the University System of Georgia, its members individually, its officers, agents or employees for any claim for damages arising or growing out of my voluntary participation in recreational programs or athletic activities.

I understand the acceptance of this release, waiver of liability and covenant not to sue the Institution, the Board of Regents of the University System of Georgia or any agent or employees thereof, shall not constitute a waiver, in whole or in part, of sovereign or official immunity by said Boards, its members, officers, agents and employees. Further, I understand that this release waiver of liability and covenant not to sue shall be effective during the time period indicated below while I am enrolled or employed at Georgia Southwestern State University.

*I have received a copy of this document and I certify that I am → \_\_\_\_\_ years of age. If you need special accommodations due to a disabling condition, you should contact the school's Disabled Student Services Office within a reasonable time, and no less than three days prior to the proposed activity.*

This \_\_\_\_ day of \_\_\_\_\_ 2 \_\_\_\_\_

\_\_\_\_\_  
Print Name Here

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Student ID Number Here

Signed in the presence of:

\_\_\_\_\_  
(Witness)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Signature of Student Here

\_\_\_\_\_  
(Witness)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Home/Work Phone Number Here

Campus Recreation Supervisor on Duty: → \_\_\_\_\_ Date: \_\_\_\_\_

Updated: 2/07

**GOOD FOR ALL RECREATIONAL ACTIVITIES AND INTRAMURAL SPORTS**