



DEPARTMENT OF RISK MANAGEMENT
1950 THIRD ST, LA VERNE, CALIFORNIA 91750-4401

WAIVER AND RELEASE OF LIABILITY AND INDEMNITY AGREEMENT PARTICIPANT

MLK Day of Service 2017

January 16, 2017

Event

Dates

IN CONSIDERATION for allowing the participant to observe or participate in any way in the event or activity ("Event") on or off campus encompassed by this Agreement and/or permitting the participant to enter for any purpose the UNIVERSITY OF LA VERNE, the participant, agree as follows:

THE PARTICIPANT HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the UNIVERSITY OF LA VERNE, its officers, agents, or employees (hereinafter referred to as 'releasees') from all liability to the undersigned for any loss or damage and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise, while the undersigned is in, upon, or about the premises or any facilities or equipment therein.

THE PARTICIPANT HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned in, upon or about the UNIVERSITY OF LA VERNE premises or on any field trip, or in any way observing or using any facilities or equipment of the UNIVERSITY OF LA VERNE, whether caused by the negligence of the releasees or otherwise.

THE PARTICIPANT HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE due to the negligence of releasees or otherwise while in, about or upon the premises of the UNIVERSITY OF LA VERNE or on any University of La Verne authorized field trip and/or while using the premises or any facility or equipment hereon.

THE PARTICIPANT further expressly agrees that the foregoing WAIVER AND RELEASE OF LIABILITY AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE PARTICIPANT further expressly agrees that in the event of an accident (or sudden illness), the University has my permission to perform whatever medical emergency treatment that may be deemed necessary on the named individual named below.

THE PARTICIPANT has no knowledge of any physical impairment that may be affected by the participant listed, participating in the activities stated below.

THE PARTICIPANT further agrees that they have read, understand, and agree to comply with the rules and safety provisions established for said activity.

THE PARTICIPANT HAS READ AND VOLUNTARILY SIGNS THE WAIVER AND RELEASE OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

THE PARTICIPANT HAS READ AND VOLUNTARILY SIGNS THE WAIVER AND RELEASE OF LIABILITY AND INDEMNITY AGREEMENT AND DOES SO VOLUNTARILY AND WITH THE UNDERSTANDING THAT SUBSTANTIAL RIGHTS ARE BEING GIVEN UP.

I HAVE READ THIS RELEASE

Participant Signature

Date

Printed Name of Participant: Student ID: D.O.B.

Address of Participant: