

## RELEASE AND WAIVER OF LIABILITY AND INDEMNIFICATION AGREEMENT FOR PARTICIPANT

Name of Student/Participant: \_\_\_\_\_\_

Student Date of Birth: \_\_\_\_\_

Student Age: \_\_\_\_\_

I, \_\_\_\_\_, am at least 18 (eighteen) years of age and desire to participate in \_\_\_\_\_\_, (the "Activity") (SELECT ONE OF THE FOLLLOWING) on \_\_\_\_\_, 20\_\_. OR from \_\_\_\_\_, 20\_\_, to \_\_\_\_\_, 20\_\_. I have reviewed and considered the seriousness and consequences of this release and indemnification agreement, and in consideration of the opportunity to participate in the Activity, I intend to be bound by this agreement, and hereby agree as follows:

I acknowledge that the Lee College Student Code of Conduct and all Lee College rules of conduct and standards of behavior remain in effect during and after my participation in the Activity. I agree to conduct myself in accordance with the rules of conduct and standards of behavior that are expected of me as a student of the Lee College and to abide by the various instructions and guidance I am given by the College or by an Activity coordinator designated by Lee College.

I do not suffer from any physical or mental impairment that would limit my ability to participate in the Activity. I understand, agree and hereby grant permission to Lee College and any of its regents, trustees, agents, employees, officers, representatives, faculty, associates, and volunteers to authorize emergency medical treatment for me, if necessary and arising out of the Activity, and further agree that such action by Lee College or any of its regents, trustees, agents, employees, officers, representatives, faculty, associates, or volunteers shall be subject to the terms of this Agreement. I understand and agree that Lee College and all of its regents, trustees, agents, employees, officers, faculty, associates, and volunteers assume no responsibility for any injury or damage which might arise out of or in connection with such authorized emergency medical treatment.

I recognize the dangers, hazards, and risks associated with travelling and participating in this Activity, and in consideration of being permitted to participate in the Activity, I agree to assume all the risks and responsibilities surrounding my participation in the Activity. On behalf of myself and my heirs, executors, administrators, and/or assigns, I hereby discharge, release and hold harmless Lee College and each of its regents, trustees, agents, employees, officers, representatives, faculty, associates, and volunteers from all liability arising out of or in connection with my participation in the Activity. For purposes of this agreement, liability means all costs, damages, expenses, claims, demands, losses, actions, causes of action, suits, and judgments of any kind that I or my heirs, executors, administrators, assigns, and/or any other person or entity on my behalf have or might have against Lee College, any of its regents, trustees, agents, employees, officers, representatives, faculty, associates, and volunteers for any injury, personal injury, harm, accident, illness, or death or because of loss of, or damage to property that occurs to me or my property during the Activity or arising from my participation in the Activity.



I FURTHER AGREE TO DEFEND, INDEMNIFY, AND HOLD HARMLESS LEE COLLEGE, AND EACH OF ITS REGENTS, TRUSTEES, AGENTS, EMPLOYEES, OFFICERS, REPRESENTATIVES, FACULTY, ASSOCIATES, AND VOLUNTEERS FROM AND AGAINST ANY AND ALL LIABILITY, CLAIMS, LOSSES, EXPENSES, JUDGMENTS OR DEMANDS, INCLUDING DEMANDS ARISING FROM INJURIES, ILLNESSES OR DEATH OF ME OR OTHER PERSONS AND/OR DAMAGE TO OR LOSS OF PROPERTY, OR FOR ANY OTHER REASON WHATSOEVER ARISING FROM MY PARTICIPATION THROUGHOUT THE ACTIVITY. I WILL FURTHER REIMBURSE LEE COLLEGE, ITS REGENTS, TRUSTEES, AGENTS, EMPLOYEES, OFFICERS, REPRESENTATIVES, FACULTY, ASSOCIATES, AND VOLUNTEERS FOR ANY EXPENDITURES, INCLUDING REASONABLE ATTORNEYS' FEES THAT LEE, ITS TRUSTEES, AGENTS, EMPLOYEES, REPRESENTATIVES, AND VOLUNTEERS MAY MAKE BY REASON OF SUCH MATTERS AND, IF REQUESTED, I WILL DEFEND SUCH SUIT AT MY OWN SOLE COST AND EXPENSE.

## THIS IS A LEGAL AGREEMENT AND INCLUDES A RELEASE OF LEGAL RIGHTS. READ AND BE CERTAIN YOU UNDERSTAND IT BEFORE SIGNING.

(Student/Participant signature)

Date

Printed Name of Student: \_\_\_\_\_