



## Waiver of Liability Release Form

In consideration of being allowed to participate in the Centenary University alternate spring break program (Date \_\_\_\_\_), the undersigned acknowledges and agrees that:

1. The risk of injury from the activities involved in this program is significant, including but not limited to the potential for permanent paralysis and death, serious injury to internal organs, musculoskeletal injuries and possible impairment to my general health and well-being.
2. I knowingly and freely assume all responsibility for any risk of loss, property damage or personal injury that may be sustained by me, or any loss or damage to property owned by me, as a result of my participation in the Centenary University alternate spring break program.
3. I further agree to release and hold harmless Centenary University and staff member, Rachel Danitz from all claims and liabilities of any type whatsoever and for damages to, loss or destruction of any property or injury, sickness or death, which may result from my participation in the Centenary University alternate spring break program.
4. I willingly agree to comply with Centenary University rules and regulations.
5. I acknowledge that I am in good physical condition and do not know of any condition or reason that I should not participate in the Centenary University alternate spring break program.
6. I understand that a medical examination to assure myself of physical fitness is desirable, that obtaining such an examination is my own responsibility.

In signing this release, I acknowledge and represent that I read the foregoing Waiver of Liability Form, understand it and sign it voluntarily as my own free act and deed. I am at least (18) years of age and fully competent.

Member (over 18)

Name (printed)

Signature

Date

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