



**Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement**

In consideration of electing to participate in Event/Activity Name

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the undersigned acknowledges and agrees that:

1. I have voluntarily elected to participate and acknowledge that my participation is elective and is in no way required by the University.
2. I have learned of and understand the various aspects of this program/activity and there may be risks not known to me or not reasonably foreseeable to me at this time. In addition, I understand that as a participant in this program/activity, I may engage in physical activities during which I could sustain serious personal injury, illness, property damage, or death as a consequence of not only the Centenary University actions or inactions, but also the action, inactions, negligence or fault of others. I further understand and agree that any injury, illness, property damage disability or death I may sustain by any means is my sole responsibility and 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 above listed activity or event.
3. I, on behalf of myself, my personal representatives, heirs, executors, administrators, agents and assigns, HERBY RELEASE, WAIVE, DISCHARGE AND COVENANT NO TO SUE Centenary University, its governing board, trustees, officers, employees, agents, volunteers, and any students for any and all liability, including any and all claims, demands, causes of action (known or unknown) suits or judgement of any and every kind (including attorney's fees) arising from an injury, property damage or death that I may suffer as a result of my participation in this program/activity.
4. I, on behalf of myself, my personal representatives, heirs, executors, administrators, agents and assigns, agree to hold harmless, defend and indemnify Centenary University, including its governing board, trustees, officers, employees, agents, volunteers and any students from any and all liability, including any and all claims, demands, causes of action (known or unknown), suits or judgments of any and every kind (including attorney fees) arising from injury, property damage or death that I may suffer as a result of my participation in this program/activity.
5. I have read and understand Centenary University's code of student conduct, and pledge to abide by it.
6. **I have reviewed the updated Covid-19 resources for students and Centenary University Covid-19 policies. I understand and agree to abide by Centenary Universities Covid-19 rules for student conduct.**
7. **I have read this agreement and fully understand its terms. I am aware that this waiver includes a release and waiver of liability, an assumption of risk, and an agreement to indemnify. I understand that I have given up substantial rights by signing this agreement and sign it freely and voluntarily without an inducement.**
8. **By My signature below I represent that I am at least eighteen (18) years of age.**

Name	Signature	Date