

**UNIVERSITY OF CENTRAL MISSOURI
ASSUMPTION OF RISK AND RELEASE FORM**

THIS IS A RELEASE OF LEGAL RIGHTS – READ AND UNDERSTAND BEFORE SIGNING

Name of Participant: _____

Date of Birth: _____

Program/Activity: Inflatables

I hereby agree as follows:

Assumption of Risk and Release of Claims. In consideration of my minor child being allowed to participate in the University of Central Missouri (“University”) Inflatables “Activity”, I do hereby acknowledge that I am fully aware of all risks and hazards that may be directly or inherently involved in this Activity, which include but are not limited to, (1) minor injuries such as scratches, bruises, and sprains; (2) major injuries such as eye injury or loss of sight, joint or back injuries, fractured or broken bones, heart attacks and concussions; and (3) catastrophic injuries including paralysis and death. **I, for myself and minor child and anyone entitled to act on my behalf, do hereby voluntarily releases, waives, and forever discharges any and all claims, including negligence against the University of Central Missouri, its board, administrators, employees, volunteers, and all other persons or entities acting in any capacity on its behalf (collectively, “Releasee”) that relate in any way to anything undertaken in conjunction with this Activity.**

I do hereby assure the University that I either have adequate health insurance or have or will have adequate funds necessary to provide for and pay any medical costs that may be attendant as a result of injury from my minor child’s participation in the Activity and that I will indemnify and hold the University and its governors, officers and employees, harmless. I also do hereby assure the University that there are no health related reasons or problems which preclude or restrict my minor child’s participation in this Activity.

Standards of Conduct. My minor child and I will comply with the University’s rules, standards and instructions for behavior. I agree that the University has the right to enforce the standards of conduct, in its sole judgment, and that it may impose sanctions, up to and including denial of participation in the Activity, for violating these standards or for any behavior detrimental to or incompatible with the interest, harmony, and welfare of the University or others.

I acknowledge that this document contains, among other things, a negligence waiver. I certify that I have read the Agreement, understand it, and agree to be bound by its terms. No representations, statements, or inducements, oral or written, apart from the foregoing written statement, have been made. This agreement shall become effective only upon receipt by the University and shall be governed by the laws of the state of Missouri, which shall be the forum for any lawsuits filed under or incident to this Release or to the Activity.

X _____
Signature of Parent or Guardian

Date

Printed Name of Parent or Guardian