

**RELEASE OF LIABILITY, WAIVER OF CLAIMS, EXPRESS  
ASSUMPTION OF RISKS, AND HOLD HARMLESS AGREEMENT**

In consideration of participating in the \_\_\_\_\_ hosted by \_\_\_\_\_ of Florida Atlantic University (the "Activity"), I hereby agree as follows:

I, \_\_\_\_\_, for myself and my estate, heirs, administrators, executors, and assigns, hereby release and hold harmless the State of Florida, the Florida Atlantic University Board of Trustees, and their officers, directors, employees, representatives, agents, and volunteers (collectively, the "Releases"), from any and all liability and responsibility whatsoever, however caused, for any and all damages, claims, or causes of action that I, my estate, heirs, administrators, executors, or assigns may have for any loss, illness, personal injury, death, or property damage arising out of, connected with, or in any manner pertaining to the Activity, whether caused by the negligence of Releases or otherwise.

I fully understand that there are potential risks and hazards associated with the Activity, including, but not limited to, possible injury or loss of life. I further understand that while participating in the Activity, I will be interacting with persons, places or objects that are not associated with or under the control or supervision of the Releases. Despite the potential risks and hazards associated with the Activity, I wish to proceed, and freely accept and assume all risks and hazards that may arise from my participation in the Activity and that could result in loss, illness, personal injury, death, or property damage, whether caused by the negligence of Releases or otherwise.

I further hereby agree to defend, indemnify and hold harmless the Releases from any judgment, settlement, loss, liability, damage, or costs, including court costs and attorney fees for both the trial and appellate levels, which Releases may incur as a proximate result of any act or omission on my part during my participation in the Activity.

In signing this agreement, I acknowledge and represent that I have read and understand it and that I sign it voluntarily and for full and adequate consideration, fully intending to be bound by the same.

**I HAVE READ THIS AGREEMENT, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND VOLUNTARILY AGREE TO BE BOUND BY IT.**

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Name of Participant

\_\_\_\_\_  
Participant's Signature  
(I certify that I am 18 years of age or older)

\_\_\_\_\_  
Parent/Guardian's Signature  
(If Participant is under 18 years of age)

FLORIDA ATLANTIC UNIVERSITY