

Donnelly College
Intramural Sports Assumption of Risk Agreement and
Release

FALL 2022

Please read carefully and complete before signing.

The below-named participant is fully aware of the risks and hazards of personal injury that may arise through participation in the activities associated with intramurals, including risks or hazards that arise from the participation to and from events, and said person assumes the risk of his/her participation. Intramurals includes, but not limited to basketball, volleyball, soccer, and futsal.

The below-named participant further understands that any and all expenses arising from an accident or injury to the participant's person or property, including but not limited to, ambulance and emergency medical services, are the sole responsibility of the participant.

The below-named participant hereby acknowledges that Donnelly College strongly recommends that all participants have a yearly physical examination before participation and further recommends that the participant purchase insurance to cover all accidents or injuries.

In consideration for Donnelly College allowing below-named person to participate in the recreational activities and receive educational, social, and other benefits there from, the below-named participant hereby assumes all risks associated with such participation, including the risks associated with transportation to and from all events, and does hereby fully and forever release and discharge, any covenant to hold harmless, and indemnify and repay any sums paid by Donnelly College and/or its Trustees, officers, employees, agents, or their heirs, successors, executors, and assigns from or for any and all claims, demands, damages, rights, of action, or causes of action, present or future, whether the same are known or unknown, anticipated or unanticipated, resulting or arising from or incident to the below-named person's participation in intramurals.

I have read and fully understand the foregoing Assumption of Risk Agreement and release and hereby execute the same voluntarily on this _____ day of _____, 20____.

Participant Signature _____

Print Full Name _____

Student ID Number: _____