WAIVER AND RELEASE
Under 18 years old

This is a legally binding Release of Liability made by ________________________________,
Full Legal Name of Participant/Student
and by ________________________________,
Full Legal Name, Address and Relationship of Participant’s Parent or Guardian
to Ursuline College

We, the undersigned, request that ________________________________, (referred to as
“Participant”) be permitted to participate in the Dancing Arrow’s Tryouts at Ursuline College. We fully understand and appreciate the
significant dangers, hazards and risks associated with being a candidate, including bodily injury, accident, and loss of limb or life. These dangers and risks include those within every facet of student life, including but not limited to any independent activities Participant may undertake while participating at Ursuline College. We understand that we are responsible for providing transportation both to and from the Activity for the Participant if need be.

We understand that this release is in regard to all activities associated with academics and student life that will take place on the College’s Campus and that the College is not responsible if the Participant leaves campus at any time. We understand that we could be asked to pick the Participant up immediately from the College should the Participant violate College policy in which the violation would deem suspension or expulsion. We further understand that the College does not require Participant to take part in the Activity, but Participant wishes to do so, despite the possibility of dangers and risks and despite this Release. We further agree that Participant has individually assumed the risks involved with student life.

In consideration of the Participant being permitted to take part in the student life and academics, we do release, waive, forever discharge and covenant not to sue the College, its employees, administrators, board members, agents and insurers (“Releasees”), from and against any and all liability from harm, injury, damage, claims, demands, actions, causes of action, costs, and expenses of any nature which Participant may have or which may hereafter accrue to Participant, arising out of or related to any loss, damage or injury that may be sustained by Participant or by any property belonging to Participant. We understand that this Release covers liability, claims and actions caused entirely or in part by any acts or failures to act of the College (or its board, employees, or agents), including but not limited to negligence, mistake, or failure to supervise by the College while participating within any stage of student life and academics.

We understand that the College does not have medical personnel available. We understand and agree that the Releasees are granted permission to authorize emergency medical treatment for the Participant, if necessary, and that such action by Releasees shall be subject to the terms of this Agreement. We understand and agree that Releasees assume no responsibility for any injury or damage which might arise out of or in connection with such authorized emergency medical treatment.

I further state that I am Participant’s Parent □ or Guardian □ (Please check one), and am fully competent to sign this Agreement; and that I execute this Release for full, adequate, and complete consideration fully intending for myself, for the Participant, and for the Participant’s family, estate, heirs, administrators, personal representatives, or assigns to be bound by the same. We recognize that this Release means we are giving up, among other things, rights to sue the College, its employees, administrators, board members, agents and insurers for injuries, damages or losses we may incur.

We have read this entire Release and agree to be bound by it.

THIS IS A RELEASE OF LEGAL RIGHTS. READ AND BE CERTAIN YOU UNDERSTAND
THIS RELEASE BEFORE SIGNING IT.

PARENT OR GUARDIAN:

______________________________  ______________________________
Signature                             Date

Name (Please Print)