University of Louisville Department of Intramural and Recreational Sports

Sports Clubs Assumption of Risk Agreement and Release

Please read carefully and completely before signing.

The above-named participant is fully aware of the risks and hazards of personal injury, including death or loss of property, that may arise through participation in the activities associated with the club, including risks or hazards that arise from the participation to and from events, and said person assumes the risk of his/her participation.

The above-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 above-named participant hereby acknowledges that the Department of Intramural and Recreational Sports at UofL 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 the University of Louisville allowing above-named person to participate in the recreational activities with the sports club, and receive educational, social, and other benefits there from, the above-named participant hereby assumes all risks associated with such participation, including the risks associated with transportation to and from all events, and does herby fully and forever release and discharge, any covenant to hold harmless, and indemnify and repay any sums paid by, Sport Club Federation and/or the University of Louisville and/or its Trustees, officers, employees, agents, or their heirs, successors, excecutors, 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 above-named person's participation in the sport club listed above.

I have read and fully understand the foregoing Assumption of Risk Agreement and release and hereby execute the same voluntarily on this day of
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Participant Signature
Print Full Name
Student ID Number:
Parent or Guardian signature (if under 18)
Print Full Name:
Witness Signature: