



Assumption of risk, hold harmless, indemnity and release

Event name: _____

Activity description:

I am signing this release to participate in the activities described above. This release, indemnity and assumption of risk statement cover all events and occurrences associated with the activities, including any associated travel, meals and lodging. I understand that if I have concerns about my health or ability to participate, I must discuss those concerns with my physician before deciding to participate.

I agree to assume the risk that unexpected events may occur and result in harm, injury or illness to myself or damage to my property while I am participating or observing activities or while I am traveling to or from the activities. I agree to indemnify the state of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents and employees. I also agree not to sue ASU for any harm or damage associated with my participation, observation or travel if the harm or damage is not due to the negligence or fault of ASU. I understand that my participation in these activities is voluntary.

Note: In this agreement, ASU means the state of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents and employees.

Participant — first and last name printed.	Participant signature — participants 18 and older.	Guardian signature — participants under 18.