



ACTIVITY CONSENT AND RELEASE FORM

The undersigned, being the age of 18 or above, or with a legal parent/guardian's signed consent, desires to participate in the University's Campus Recreation program activities including, but not limited to, aquatics, fitness, intramurals, outdoor trips, personal training, wellness, special events and birthday parties. I realize the activities are potentially hazardous. I should not enter the program unless I am medically able and properly trained which I represent myself to be. I assume any and all risks associated with the program including, but not limited to, falls, personal injury, collision with other participants, injury due to use of equipment and facilities, and the effects of weather including high heat and/or humidity, all such risks being known and appreciated by me. I attest that I am physically fit to participate in this program. I understand that my participation in the activity is entirely voluntary on my part.

Knowing the risks and, in consideration of being permitted to participate in the Campus Recreation sports program at the University, I for myself and my personal representatives, heirs and assigns, do hereby **hold harmless and release, waive, discharge and covenant not to sue** the Board of Governors of Missouri State University, Missouri State University, its Board members, officers, and employees (hereinafter collectively referred to as "MISSOURI STATE UNIVERSITY") from any and all claims or liability on account of death, damage, or injury to person or property of the undersigned of any kind or nature whatsoever arising out of, or in any way connected with the undersigned's participation in the program, **even though the claim or liability may arise out of the negligence or carelessness on the part of MISSOURI STATE UNIVERSITY, or any third person, whether foreseen or unforeseen, known or unknown.**

The undersigned hereby expressly agrees that this consent and release is intended to be as broad and inclusive as permitted by the laws of the State of Missouri and that if any portion hereof is held invalid, it is agreed that the balance, notwithstanding, continue in full legal force and effect.

I also declare that I will take all necessary and/or recommended precautions to ensure my own person against physical and/or mental injury and property loss or damage. This includes, but is not limited to, following printed or verbal instructions given by the activity leader(s).

I hereby authorize and give my irrevocable and unlimited consent to Campus Recreation and Missouri State University to copyright, use, and/or publish all images, photographs, recordings, or slides in which I, the undersigned, appear while enrolled as a participant in any of their programs. I further agree that Campus Recreation or Missouri State University may transfer, use, or cause to be used such media in public displays, publications, commercials, and advertisements, and otherwise without limitations or reservation.

The undersigned further states that he/she has carefully read the foregoing Activity Consent and Release, knows the contents thereof, and has agreed to sign the Activity Consent and Release as his/her own free act and deed.

Location: Bill R Foster & Family Recreation Center, Missouri State University, Springfield, MO

Participant Name (printed): _____ Guest#/M#: _____

Participant Signature: _____ Date: _____

Participant Age (if under 18): _____ (If under 18 parent/guardian must Print and Sign below)

Parent/Guardian Name (printed): _____

Parent/Guardian Signature: _____ Date: _____