## SOUTH CAROLINA STATE UNIVERSITY LIABILITY RELEASE AND WAIVER

| parent or legal guardian as referenced below. I desir ("SCSU") activity or opportunity:  | ears of age or I am providing binding consent and release through my re to participate in the following South Carolina State University  |
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| (hereinafter collectively referred to as the "Activity").  |  |
| [date(s)], is hosted by  | [SCSU office/dept hosting the Activity], and may occur at the controlled by SCSU [location(s)]   |
| from the Activity, and in any other effort associated wit  | nazards, and risks inherent in the Activity, in the transportation to and h, or that I may undertake supplemental to, any such Activity. These tirment to my body, general health, and well-being, and could include   |
| the Activity, on behalf of myself, my family, spouse, assume all the risks and responsibilities surrounding a Activity, and in any other effort associated with, or that myself and the Releasors, I hereby covenant not to strustees, officers, representatives, agents, and employed the Releasees from and against any and all liability for a costs, and expenses of any nature that I may have or that to the Activity, whether caused by the negligence or car and hold harmless the Releasees from and against any fees, which may arise due to my participation in the awaiver shall bind me, the members of my family and | th endeavors, and in consideration of being permitted to participate in heirs, and personal representative(s) (the "Releasors"), I agree to my participation in the Activity, the transportation to and from the t I may undertake supplemental to, any such Activity. On behalf of the host of the Activity, South Carolina State University, or its es ("Releasees"), and I hereby release, waive, and forever discharge any harm, injury, damage, claims, demands, actions, causes of action, at may hereafter accrue to me or a Releasor, arising out of, or related relessness of the Releasees or otherwise. I further agree to indemnify loss, liability, damage, or cost, including court costs and attorneys' Activity. It is my expressed intent that this <b>Liability Release and</b> I spouse, if I am alive, and my estate, family, heirs, administrators, and shall be deemed as a legally binding release, waiver, discharge and |
| necessary, and that such action by Releasees shall be sub  | tes permission to authorize emergency medical treatment for me, if bject to the terms of this <b>Liability Release and Waiver</b> . I understand any injury or damage which might arise out of or in connection with   |
|  | or problems that preclude or restrict my participation in the Activity. Outh Carolina State University is obligated to provide for any of my sume all risk and responsibility for those needs.   |
| 6. I agree to abide by any instruction and guidanc representative at all times while participating in the Acti   | e I may be given by any designated host of the Activity or any SCSU vity.  |
|  | JDES A RELEASE OF LEGAL RIGHTS. READ AND BE<br>GNING. I AM 18 YEARS OF AGE OR OLDER, AND HAVE<br>SE AND WAIVER.  |
| IF I AM UNDER THE AGE OF THE 18, I UND<br>AGREE AND SIGN BELOW.  | DERSTAND MY PARENT/LEGAL GUARDIAN MUST ALSO  |
| Signature:   | Date:  |
| Print Name:  |  |
| release, and, for myself, my heirs, assigns, and next of   | egal responsibility for this participant, do consent and sign this ikin, I release and agree to indemnify and hold harmless SCSU all liabilities incident to my minor child's involvement or led above.  |
| (Print Parent/Legal Guardian Name)   | (Parent/Legal Guardian Signature)  |