



**RELEASE, COVENANT NOT TO SUE AND ASSUMPTION OF RISK**

Emory University has made arrangements that will permit me to engage in the following activity:

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I acknowledge that I have chosen to participate in this activity and that my participation in this activity is not required in any way by Emory University.

I understand that Emory University does not guarantee the competency or mental or physical condition of any person associated with this activity, the physical condition of any facility or equipment used in connection with this activity, or the suitability of this activity for my participation. I further understand that Emory University does not provide me with any insurance, whether health, accident or otherwise, in connection with this activity and I state that I am covered by an accident and health insurance policy.

I am aware that there are risks, hazards and dangers inherent in such activity, the nature of which have been explained to me. I understand that the risks involved in participation in this activity may include damage to property, bodily injury, exposure to pathogens and other biological and chemical hazards and death. I nonetheless choose to participate in this activity in spite of such risks, and I assume all risks of such danger.

I further agree that in consideration of being permitted to participate in this activity by Emory University, I assume all risks associated with the activity including personal injury or death that may be sustained by me in any way connected with the activity.

**RELEASE, COVENANT NOT TO SUE AND WAIVER**

I agree that for the consideration of Emory University's allowing me to participate in the activity described herein, I release, covenant not to sue and forever discharge Emory University and its trustees, officers, agents, employees and students of any and from all claims, demands, rights, and causes of action of whatever kind of nature, including but not limited to, negligence, arising from and by reason of any and all known and unknown, foreseen and unforeseen bodily and personal injuries, damage to property, and the consequences thereof, including death, resulting from my participation in, or in any way connected with, such activity.

By signing this document, I acknowledge that I have read this document, and have had the opportunity to ask questions concerning this document before signing, and agree to be bound by all the above.

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**Date**

(Married volunteers, please see second page for signature for spouse)

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**Participant's Signature**

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**Date**

(Parent/Guardian's signature required if participant is under the age of 18)

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**Parent/Guardian's Signature**



**RELEASE, COVENANT NOT TO SUE AND WAIVER**

**SIGNATURE OF SPOUSE REQUIRED FOR MARRIED PARTICIPANTS**

I have read the Release and Assumption of Risk signed by my spouse, and in consideration of the premises stated, I hereby release, covenant not to sue and discharge Emory University and its respective trustees, officers, agents, employees, and students of and from all claims, liabilities, damages, or loss arising out of, or in any way related to, participation by my spouse in such activities.

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**Name of Participating Spouse**

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**Date**

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**Participant's Signature**