## University of Southern California WAIVER, RELEASE AND ASSUMPTION OF RISK

I, the undersigned, may participate in all or part of the following activity:

(the "Activity").

I execute this Waiver, Release and Assumption of Risk (this "Release") in consideration for being permitted to participate in all or part of the Activity and I participate in the Activity voluntarily. **I understand and assume the risks and dangers in the Activity**, including but not limited to: accidents; mechanical problems; motion sickness; hidden or obvious equipment defects or problems; theft; other participants' or people's actions, crimes or terrorist activity; bad weather; fire; crashing; drowning; bodily injury; property damage; other injuries or death. To participate in this Activity, I hereby voluntarily agree to the terms and conditions of this Release, on behalf of myself and my heirs, executors, guardians, legal representatives, administrators and assigns (collectively "Releasors"):

1. I certify that I am fully capable of participating in Activity. I know of no reason, health-related or otherwise, why I should not participate in the Activity. I accept full responsibility for any injuries or illnesses, including death, that I may suffer during the Activity, including, but not limited to, those resulting from any health problems I may have, known or unknown to me. My healthcare provider has consented to my participation in the Activity.

2. I release, discharge, agree not to sue, and waive any and all claims against University of Southern California ("USC"), their affiliates and their respective directors, officers, faculty, trustees, physicians, staff, insurers, volunteers, agents and assigns (collectively, the "Released Parties") from any and all liability or expense (including but not limited to attorneys' fees) for any and all harm, loss, personal injury, property damage, or death that may arise during, or from my participation in or attendance at the Activity, whether caused by the negligence of the Released Parties or otherwise. This Release shall apply to any expense, incident, injury, accident or death associated with the Activity.

3. I understand that my participation in the Activity is entirely voluntary, and is not covered by worker's compensation nor the insurance or funds of USC. Any injuries or other harm that I suffer during or from the Activity are solely my responsibility, to be claimed through my health plan or paid by me, and I hereby agree to accept any and all such risks and dangers. I have obtained and shall maintain insurance applicable to my participation in the Activity.

4. I certify that no one has made representations or promises to me to sign this document, that I understand its meaning and effect, and that I sign it of my own free will. This Release is governed by California law. If any portion of this Release is found invalid, this Release shall be enforced to the maximum extent allowed by law.

## I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PARTS OF THIS RELEASE. THIS IS A LEGALLY BINDING DOCUMENT. I ASSUME ALL RISKS ARISING FROM THE ACTIVITY. ON BEHALF OF MYSELF AND ALL RELEASORS, I VOLUNTARILY SIGN MY NAME TO ACCEPT ALL TERMS OF THIS RELEASE.

Signature: \_\_\_\_\_

Name Printed:			
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Date:	
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