

SHIPPENSBURG UNIVERSITY OF PENNSYLVANIA

CLUB SPORTS RELEASE AND INDEMNITY AGREEMENT

**THIS IS A LEGAL DOCUMENT WHICH AFFECTS YOUR RIGHTS.
READ IT CAREFULLY BEFORE SIGNING**

In partial consideration for being permitted to participate in the Shippensburg University club sports program and for using the associated practice and playing facilities and equipment, and in consideration of the voluntary nature of such participation and use, I hereby release, hold harmless, and forever discharge Shippensburg University and Shippensburg University Student Services Inc., its employees and agents, from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, property damage, or personal injury, including death, that may be sustained by me, or otherwise, while participating in such activity. Such participation includes practice, club functions, and travel to and from all club sports activities and functions.

I am fully aware of the risks and hazards associated with participation in and the use of the facilities and equipment for any club sports I elect. I hereby elect voluntarily to participate in said activities and fully acknowledge that I retain the full responsibility for any risk or loss, property damage, or any personal injury, including death, that may be sustained by me or any loss or damage to property owned by me as a result of being engaged in such activities, whether caused by negligence of the University or Shippensburg University Student Services Inc., its employees and agents, or otherwise. I further acknowledge that I have procured my own adequate insurance for such loss, damage, or injury. I further agree to indemnify and hold harmless the University and Shippensburg University Student Services Inc., its employees and agents, from any loss, liability, damage or cost, including court costs and attorney's fees, that may incur due to my participation in said activities whether caused by the negligence of the University or Shippensburg University Student Services Inc., its employees and agents, or otherwise.

This release and hold harmless agreement is binding on myself, my heirs, assigns, and personal representatives.

Prior to signing this document, I have had an adequate opportunity to read and understand it.

Agreed, this _____ day of _____, 20_____.

_____	65	_____
Participant's Signature	SU ID #	Participant's Health Ins. Co.
_____	_____	_____
Participant's Printed Name	Sport Club or Activity	Health Ins. Policy #
_____	_____	_____
Witness	Participant's Local Address (include Street, Apt., City, Zip)	
_____	_____	_____
Parent Signature (if member is a minor)	Local Phone #	Class Status (Fr.,So., etc.)