



WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT
WAIVER
 University of California, Santa Cruz

Participants Name: _____ Sport: _____

Waiver: In consideration of being permitted to participate in any way in Intercollegiate Athletics

Hereinafter called "Activity", I, for myself, my heir, personal representatives or assigns, **do hereby release, waive, discharge, and covenant not to sue.** The Regents of the University of California, its officers, employees, and agents from liability **from any and all claims** resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in Activity.

_____	_____	_____
Print name of Student-Athlete	Signature of Student-Athlete	Date
_____	_____	_____
Print name of Parent/Guardian (If under 18 years)	Signature of Parent/Guardian (If under 18 years)	Date

Assumption of Risk: Participation in Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but risks range from 1) minor injuries such as scratches, bruises, and sprains to 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions to 3) catastrophic injuries including paralysis and death

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in Activity I hereby **assert that my participation is voluntary and that I knowingly assume all such risks.**

Indemnification and Hold Harmless: I also agree to INDEMNIFY AND HOLD The Regents of the University of California HARMLESS from any and all claims, actions, suits, procedures, cost, expenses, damages, and liabilities, including attorney's fee brought as a result of my involvement in Activity and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understands its terms, and **understanding that I am giving up substantial rights, including my rights to sue.** I acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

_____	_____	_____
Print name of Student-Athlete	Signature of Student-Athlete	Date
_____	_____	_____
Print name of Parent/Guardian	Signature of Parent/Guardian (If under 18 years)	Date

Please keep a copy of these documents for your records.