

# University of Southern Indiana Activity Waiver and Release of Liability

In consideration of my participation in \_\_\_\_\_  
(name of activity)

conducted on \_\_\_\_\_ at \_\_\_\_\_  
(dates) (place(s))

The University of Southern Indiana or The receiving instruction in this activity or any activities incidental thereto, wherever, whenever, or however the same may occur.

I understand that participation in this activity may involve certain risks. Full disclosure has been made to me of the risks and dangers connected with this activity. In addition, I understand that participation in this activity involves activities incidental thereto, including, but not limited to:

\_\_\_\_\_ as well as travel to and from the site of the activity, participation at sites that may be remote from available medical assistance, and the possible reckless conduct of other participants.

\_\_\_\_\_ for any and all claims arising as a result of my participation in this activity or any activities incidental thereto, wherever, whenever, or however the same may occur.

I understand that this waiver is intended to be as broad and inclusive as permitted by the laws of the state of Indiana, and I agree that if any portion is held invalid, I am giving up legal rights which may be available to me for the ordinary negligence of the University or any of the parties listed above.

**CAUTION: READ THIS DOCUMENT CAREFULLY BEFORE SIGNING!**