

SAM HOUSTON STATE UNIVERSITY

**ASSUMPTION OF RISK and RELEASE
OF DANCE DEPARTMENT PARTICIPATION**

In consideration for my participation in the following Sam Houston State University (“University”) activity, I hereby agree to this Assumption of Risk and Release.

Activity: _____ Student name: _____
Location of Activity: _____ SAM ID: _____
Dates of Activity: _____

Assumption of Risk & Release

Participant understands that participation in the above described activity is entirely voluntary and that it has inherent dangers and risk of physical injury that cannot be eliminated. **I HAVE BEEN WARNED AND FULLY UNDERSTAND THE POTENTIAL FOR INJURY THROUGH PARTICIPATION.** I also fully understand that this document does not completely describe all of the risks, hazards, and dangers that may result from participation in the Activity. **I EXPRESSLY AND SPECIFICALLY ASSUME ANY AND ALL RISKS OF INJURY OR PROPERTY DAMAGE RESULTING FROM PARTICIPATION.**

I AGREE THAT IN CONSIDERATION OF THE UNIVERSITY’S SPONSORING THE ACTIVITY AND PERMITTING MY PARTICIPATION, I (FOR MYSELF, MY HEIRS, EXECUTORS AND ADMINISTRATORS) HEREBY RELEASE, HOLD HARMLESS, DISCHARGE, AGREE NOT TO SUE, AND OTHERWISE AGREE TO INDEMNIFY THE UNIVERSITY, THE TEXAS STATE UNIVERSITY SYSTEM, THEIR REGENTS, EMPLOYEES, AGENTS, AND VOLUNTEERS FROM AND AGAINST ANY AND ALL CLAIMS, LAWSUITS, AND CAUSES OF ACTION OF ANY KIND WHATSOEVER WHICH ARE RELATED TO, ARE AGGRAVATED BY, OR ARISE OUT OF MY PARTICIPATION IN THEACTIVITY , INCLUDING, BUT NOT LIMITED TO, NEGLIGENCE OF ANY KIND OR NATURE, WHETHER FORESEEN OR UNFORESEEN.

I am of the age of eighteen (18) years or older. I acknowledge that I have carefully and completely read, understood, and that I **voluntarily** sign this assumption of risk and release, and I hereby bind myself to the terms and conditions stated within.

Participant Signature

Participant Printed Name

Date