

**Health Education. Exercise Science and Physical Education Department and Wellness Program  
2017-2018**

**Participant Agreements and Waiver Form**

Student/Participant Responsibilities, Acknowledgement and Agreements

I, the undersigned, hereby acknowledge that I have carefully read and understand the student responsibilities, recreation/fitness program procedures, and attendance policies. Furthermore, having been informed and advised, I willingly agree to the requirements and terms stated in the above-mentioned documents.

Informed Consent

Every effort will be made to provide you with a safe and enjoyable experience. Physical activities do, however, include a varying degree of inherent risk and danger. All participants are asked to read and sign a waiver of liability and a statement that you understand and accept the potential dangers associated with your participation in Physical Activity Programs at Montgomery College. If you have questions or concerns with this policy, discuss them individually with your program instructor/supervisor.

Assumption of Risk

I, the undersigned participant, acknowledge and understand the existence of inherent dangers and risks associated with my participation in physical and recreation activities. I recognize the term (activities) encompasses all aspects of the program including preliminary and subsequent matters such as, but not limited to, setting up and taking down equipment, loading or unloading equipment or gear, and from the place of activity. Furthermore, I assume all such risks and agree to accept personal responsibility for any injuries, permanent disabilities, loss of or damage to my personal property, and loss of life.

Waiver of Liability

In consideration of Montgomery College furnishing services enabling me to participate in this activity, I hereby voluntarily release and forever discharge Montgomery College, its officers, agents, employees, and instructors, from any all liability or claims for any injury, illness, death or damage to myself or my property arising out of or in any way connected with my participation in this activity. This release specifically includes, but is not limited to, liability or claims based upon negligent acts or omissions of Montgomery College, its officers, agents, instructors, and employees.

Release of Liability

I, on behalf of myself, my personal representative and my heirs, agree, promise, and covenant not to sue, assert, or otherwise maintain any claim against Montgomery College, its officers, agents, employees, and instructors, from any all liability or claims for any injury, illness, death or damage to myself or my property arising from or in any way connected with my participation in this activity.

Class/Activity/Class \_\_\_\_\_ Semester \_\_\_\_\_

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian's Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

(If participant is less than 18 years of age)



2017 – 2018

**Health Enhancement, Exercise Science, Physical Education  
Student Open Gym / Wellness Program**

**EMERGENCY CONTACT INFORMATION**

Name: \_\_\_\_\_

M#: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

**Emergency Contact Person:**

Name: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Phone Number: \_\_\_\_\_