NORTH DAKOTA UNIVERSITY SYSTEM – DAKOTA COLLEGE AT BOTTINEAU
PARTICIPATION, WAIVER, AND RELEASE OF LIABILITY FORM

Team Name: Semester & School Year:

Activity:

Acknowledgment and Assumption of Risk

I wish to participate in the activity specified above. I am aware that this activity may be a vigorous activity that can involve severe cardiovascular stress and potentially violent physical contact.

I understand that this activity involves certain risks for physical injury. I understand that equipment, if any, which may be provided for my protection may be inadequate to prevent serious injury. I also understand that there are potential risks of which I may not presently be aware.

In addition, I understand that my participation in this activity (whether for practice, performance, or game) involves activities and risks incidental thereto including, but not limited to, travel to and from the site of the activity, participation at sites that may be remote from available medical assistance, and exposure to the possible reckless conduct of other participants.

Nevertheless, **I voluntarily elect to participate in this activity with knowledge of the danger involved, and I hereby agree to accept and assume any and all risks of property damage, personal injury, or death.**

Dakota College at Bottineau "College" does not insure students in the activity and students who want to be covered must obtain their own insurance. The College asserts lack of responsibility or liability for injury resulting from the provision of the activity.

Waiver of Liability and Indemnification

In consideration for being allowed to voluntarily participate in the above-referenced activity, on behalf of myself, my personal representatives, heirs, next of kin, successors and assigns, I forever:

a. **waive, release, and discharge the State of North Dakota** and its agencies, officers, and employees from any and all negligence and liability for my death, disability, personal injury, property damages, property theft or claims of any nature which may hereafter accrue to me, and my estate as a direct or indirect result of my participation in the above-referenced activity or event; and
b. **indemnify, save, and hold harmless the State of North Dakota** and its agencies, officers, and employees of, from and against any and all claims of any nature including all costs, expenses, and fees arising out of or resulting from my actions during this activity or event.

*I, the undersigned participant, affirm that I am at least 18 years of age and am freely signing this agreement. **I have read this form and fully understand that by signing this form I am giving up legal rights** and/or remedies which may otherwise be available to me regarding any losses I may sustain as a result of my participation. I agree that if any portion is held invalid, the remainder will continue in full legal force and effect.

Waiver Signature

Signature: Date

Print Name:

Address:

Phone Number: