I Promise to Play Every Day!

Family Event on Sunday June 5th, 11am-3pm

Regency Athletic Complex at Auraria Campus 1390 Shoshone St. Denver, CO. 80204

3 Sections 1 Event!

Activities, Nutrition, & Community Opportunities

Come enjoy:

- relay races
- inflatable obstacle courses
- dance parties
- prizes
- snacks
- Denver pass to La Alma Recreation Center
- meet Rowdy the Roadrunner!



For more information contact:

Jessica Olivas
Project coordinator
720-537-6354
visit & RSVP at

www.promisetoplay.com to win a prize!

PLEASE SUBMIT THIS PORTION TO THE CHECK-IN TABLE AT THE EVENT

Notice to Participants of Risk and Waiver of Responsibility

Event: I Promise to Play Every Day Date: Sunday June 5th, 2016 Time Duration: 11:00am-3:00pm Participant Name ______ Parent/Guardian Name (if minor participant) ______ Emergency Contact Phone Numbers _______

The Metropolitan State University of Denver welcomes you as a participant in this activity, including the use of Metropolitan State University of Denver facilities and equipment. Please read through the following important information.

I exercise my own free and voluntary choice to participate in the designated activity, including use of facilities and equipment provided by the University of Colorado. I understand and assume all associated risks of the designated activity. These risks include, but are not limited to: rolled ankle, concussion, sun poisoning, heat stroke, heat rash, rope burn, other physical activity related injuries.

I agree to assume all risk of personal injury or loss, bodily injury (including death), damage to or loss of, or destruction of any personal property resulting from or arising out of participation in the designated activity. I also release, waive, indemnify, hold harmless, and discharge the Metropolitan State University of Denver from all claims, damages, and injuries arising out of my activities, including my use of equipment and facilities provided by the Metropolitan State University of Denver.

Metropolitan State University of Denver does not provide health insurance for individuals participating in activities made available or sponsored by the Metropolitan State University of Denver. As such, you or your personal health insurance will be responsible for payment of medical services and care for any injuries sustained during the designated activity.

I hereby certify that I have read and understand the provisions above. For participants under 18 years of age, the parent or guardian accepts the above terms and grants permissions for the student's participation on behalf of said minor, as **permitted by C.R.S. § 13-22-107.**

Activity Participant	Date
Parent/Guardian for Minor	Date

