

EL PASO COUNTY COMMUNITY COLLEGE DISTRICT ACTIVITY RELEASE FORM

(hereinafter the “*Activity*”)

(hereinafter the “*Participant*”)

By signing this form, I represent to El Paso Community College (the “*College*”) that I am the Parent and/or Guardian of Participant, who is under 18 years of age, and am fully competent to sign this Agreement. I understand that the Activity may expose Participant to risks or hazards that may result or proximately cause the illness, personal injury, or death of Participant. I further understand that the College has made no representation or warranty regarding the competency, training, or supervision of any operator of equipment used in the Activity or the quality of the technology, equipment, tools, or materials used for the Activity. With my full understanding and appreciation of the nature of such hazards and risks, I give permission for Participant to participate in the Activity.

In consideration for the participation and educational benefits to Participant from the Activity, I hereby accept all risk to Participant’s health, life, and property arising from or related to the Activity. **I, along with my spouse, if any, fiduciaries, agents, representatives, estate, heirs, executors, next of kin, and assigns, hereby release and forever discharge the College, its trustees, directors, administrators, officers, employees, agents, and representatives, in their individual and official capacities, from any and all claims, demands, damages, losses, actions, causes of action, or suits for loss of or damage to Participant’s property and for any and all illness or injury to Participant, including without limitation his or her death, arising from or related in any way to the Activity WHETHER CAUSED BY NEGLIGENCE OF THE COLLEGE, ITS TRUSTEES, DEANS, DIRECTORS, ADMINISTRATORS, OFFICERS, EMPLOYEES, AGENTS, AND REPRESENTATIVES, IN THEIR INDIVIDUAL OR OFFICIAL CAPACITIES. I further agree to indemnify and hold harmless the College, its trustees, deans, directors, administrators, officers, employees, agents, and representatives, in their individual and official capacities, from liability for the injury or death of any person(s) and damage to property that may result from any negligent or intentional act or omission of Participant arising from or related in any way to the Activity.**

I acknowledge that nothing herein constitutes or shall be interpreted as a waiver of the College’s immunity from suit and liability.

Dated this _____ day of _____, 20____.

Signature of Parent/Guardian of Participant

Print Name

Student/Participant ID #