

Green River College Fitness Waiver, Release, and Assumption of the Risk Form

- 1. In consideration for receiving permission to participate in Green River College's Fitness Center (herein referred to as ACTIVITY), which is administered by Green River College (herein referred to as GRC), I hereby RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE, AND AGREE TO HOLD HARMLESS for any and all purposes GRC, its Board of trustees, and their officers, servants, agents, volunteers, or employees (herein referred to as RELEASEES) FROM ANY AND ALL LIABILITIES, CLAIMS, DEMANDS, OR INJURY, INCLUDING DEATH, that may be sustained by me while participating in such activity, or while on the premises owned or leased by RELEASEES, including injuries sustained as a result of the negligence of RELEASEES. I acknowledge there may be physically strenuous activities. I know of no medical reason why I should not participate. I, the undersigned, further certify that I am currently a student of GRC and have received, read, understand and agree to obey the GRC Fitness Center Rules and Regulations.
- 2. I am fully aware that there are inherent risks involved with ACTIVITY, which involve substantial risks of bodily injury, property damage, and other dangers associated with participation in this activity. Dangers related to this activity included, but are not limited to: heat stroke, heat exhaustion, broken bones, strains, sprains, bruises, cuts, concussion, heart attack, being struck by other moving objects and/or death. Each participant in the Fitness Center's activities should realize that there are risks, hazards, and dangers inherent in the use of, and in the training, preparation for and travel to and from such activities. I choose to voluntarily participate in said activity with full knowledge that said activity may be hazardous to me and my property. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH, that may be sustained by me as a result of participating in said activity including injuries sustained as a result of the negligence of RELEASEES. I further agree to indemnify and hold harmless the RELEASEES for any loss, liability, damage or costs, including court costs and attorney's fees that may occur as a result of my participation or my ward or child's participation in said activity.
- 3. I understand that RELEASEES do not maintain any insurance policy covering any circumstance arising from my participation in this activity or any event related to that participation. As such, I am aware that I should review my personal insurance coverage.
- 4. It is my express intent that this Covenant Not to Sue and Agreement to Hold Harmless shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representatives, if I am deceased, and shall be governed by the laws of the state of Washington.
- 5. In signing this Covenant Not to Sue and Agreement to Hold Harmless, I acknowledge and represent that I have read the foregoing Covenant Not to Sue and Agreement to Hold Harmless, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements apart from the foregoing agreement that has been reduced to writing have been made. I execute this document for full, adequate and complete consideration fully intending to be bound by the same, now and in the future.

This waiver is good for one academic year.	Date	SID#
Print Full Name	Signature	
For students under 18: Your parent or legal guardian must sign in addition to yourself.		
	Full Name	Parent/Guardian Signature

Green River College does not discriminate on the basis of race, creed, color, national origin, sex, sexual orientation, age, marital status, religion, disability, genetic information or on any other unlawful basis. The college is committed to preventing and stopping discrimination, including harassment of any kind and any associated retaliatory behavior. The following person has been designated to handle inquiries regarding the non-discrimination policies: Vice President of Human Resources, 12401 SE 320th Street, Auburn, WA 98092, (253) 288-3320 Disability Support Services at (253) 833-9111, ext. 2631; TTY (253) 288-3359.