Rotaract Club of Evansville
Release and Hold Harmless Agreement

I, the undersigned participant, submit my voluntary participation in Rotaract Club of Evansville activities sponsored by, endorsed by, or participation provided by Rotaract Club of Evansville ("Rotaract Club of Evansville activities"), despite my status as a member or guest of this organization.

I consent to participation in Rotaract Club of Evansville activities and acknowledge that I fully understand my participation may involve risk of serious injury or death, including losses which may result not only from my own actions, inactions or negligence, but also from the actions, inactions, or negligence of others, the condition of the facilities, equipment, or areas where the event or activity is being conducted, and/or the rules of play. I understand that if I have any risk concerns, I should discuss the risks associated with my participation with individual activity coordinators or the Rotaract Club of Evansville Board before I sign this document.

Knowing and understanding the risks involved with participation in Rotaract Club of Evansville activities, I hereby voluntarily and willingly assume responsibility for all risks and dangers associated with my participation. I agree I am financially responsible for any losses resulting from my actions and will indemnify Rotaract Club of Evansville and the Officers and Board for any loss or damage caused by myself during Rotaract Club of Evansville activities. Furthermore, I agree to use my personal medical insurance as a primary medical coverage payment if accident or injury occurs. I consent to emergency medical treatment in the event such care is required.

I certify that I am in good health and have no physical condition that would prevent participation in Rotaract Club of Evansville activities.

I agree that photographs, pictures, slides, movies, video, or other media coverage of me may be taken in connection with my participation in Rotaract Club of Evansville activities without compensation and consent to the use of photographs, pictures, slides, movies, videos, or other media coverage for any legal purpose.

In consideration of my participation in Rotaract Club of Evansville activities, I hereby waive all claims or causes of action against the Rotaract Club of Evansville organization and the Officers and Board, arising out of my participation in Rotaract Club of Evansville activities and hereby release, hold harmless, and discharge Rotaract Club of Evansville and the Officers and Board from all liability in connection therewith except such loss or damage which was caused by willful misconduct of Rotaract Club of Evansville and it's Officers and Board.

I have read this Release and Hold Harmless Agreement and understand the terms used in it and their legal significance. This Release and Hold Harmless Agreement is freely and voluntarily given with the understanding that right to legal recourse against Rotaract Club of Evansville and the Officers and Board is knowingly given up in return for allowing my participation in Rotaract Club of Evansville activities. My signature on this document is intended to bind not only myself but also my successors, heirs, representatives, administrators, and assigns.

Please utilize the space below to provide any medical/prescription information that you request be released to emergency medical providers.

_____ _____

Emergency contact name (print) **(Area code) Phone number**

_____

Relationship to the participant

List medical/prescription information below:

_____

_____

_____

_____ _____

Participant's signature **date**

_____ _____

Participant's Name (print) **(Area code) Phone number**

_____

Address **City/State** **Zip**