VILLANOVA INTRAMURALS WAIVER AND ASSUMPTION OF RISK

In return for being permitted to participate in _______________ a voluntary activity and special event undertaken by Villanova University Intramurals Department, during the Fall / Spring semester of 20___, and understanding that there are certain risks both in connection with such activity and in traveling to and from such activity, (together “the Activity”) intending to be legally bound hereby, I the UNDERSIGNED, for myself, my assigns and legal representatives hereby agree to:

1. RELEASE, WAIVE, DISCHARGE AND AGREE NOT TO SUE, Villanova University, its successors, assigns, affiliates, officers, directors, employees and agents from all manner of actions and causes of action, suits, debts, judgments, claims and demands whatsoever in law or equity, including all claims for personal injury arising in any way out of my participation in the Activity.

2. ASSUME ANY AND ALL RISKS arising from my participation in the Activity, including, without limitation, the risks of death, bodily injury or property damage, the unavailability of emergency medical care or the negligent or deliberate act of another person;

3. INDEMNIFY, DEFEND AND HOLD VILLANOVA UNIVERSITY and its officers and employees and agents harmless from, any and all claims, cause of action, damages, judgments, costs or expenses, including attorney’s fees, whatsoever, arising from my participation in the Activity. I certify that I have no medical condition that would prohibit me from participating in the Activity and that I have adequate insurance protection to cover the expense of an unforeseen accident or injury.

I acknowledge that I have read and understand this WAIVER and that by signing it I surrender valuable rights, which I have done freely and voluntarily.

All waivers must be submitted before the Captain’s Meeting. Any waivers submitted after the designated captain’s meeting for each sport will not be accepted.

**Additionally, I understand that I can only participate on one (1) men’s/women’s team and one (1) co-ed team per sport. Violation of this rule disqualifies all teams affected from tournament play or playoff games.**

Participant’s Name: __________________________________
Phone #: ______________________  Class: _________
Banner ID#:____________________

SIGNATURE: ____________________________
DATE: _________________________________

PARENT NAME: (If participant is under 18)
PARENT SIGNATURE: __________________
DATE: _________________________________