ASSUMPTION OF RISK, LIABILITY RELEASE, AND COVENANT NOT TO SUE

This is a legally-binding contract made between Student Community Government, Inc., Rhode Island College, and the Rhode Island Board of Governors for Higher Education and me. I fully recognize that there are dangers and risks to which I may be exposed by participating in:

Specific Description of Activity:	
Date:	
Time:	
These risks include but are not necessarily limited to dar	mage to my property, personal injury, and even death.
Governors for Higher Education is offering this (descrip	ac., Rhode Island College, and the Rhode Island Board of otion of activity) am under no obligation to participate in this activity, but I
want to do so, despite the possible dangers and risks.	an under no obligation to participate in this activity, but I
	onsibilities in any way associated with this activity except aployees or agents of Student Community Government, Inc, overnors for Higher Education.
Rhode Island College and the Rhode Island Board of G Student Community Government, Inc., Rhode Island Co Education its employees and agents from any and all lial to me, from my death or from damage to my propert contract covers liability, claims and actions caused en Community Government, Inc., Rhode Island College Education its employees or agents, including but not	ent Community Government, Inc. of Rhode Island College, Governors for Higher Education in this activity, I release the ollege and the Rhode Island Board of Governors for Higher bility, claims and actions that may arise from injury or harm ty in connection with this activity. I understand that this ntirely or in part by any acts or failures to act of Student e and the Rhode Island Board of Governors for Higher limited to negligence, mistake, or failure to supervise by ollege and the Rhode Island Board of Governors for Higher
Government, Inc., Rhode Island College and the Rho employees, and agents for injuries, death or any harm to	among other things, the right to sue Student Community ode Island Board of Governors for Higher Education, its my property. I further recognize and agree that this release Inc., Rhode Island College and the Rhode Island Board of the provisions of Rhode Island Gen. Laws § 7-6-9.
X Date:	
➤ Printed Name of Participant:	
■ Signature of Participant:	
[IN THE EVENT THE PARTICIPANT IS UNDER T GUARDIAN MUST SIGN BELOW]	THE AGE OF 18, HER OR HIS PARENTS AND/OR
I,	[name of parent or guardian], have read the d I agree to its terms and intend that they be legally s and assigns.
▼ Please print the following information:	★ Medical Information
Name:	Should you have any allergies or
Address:	medical conditions of which we should
	be aware, please list below:
Phone Number:	
Emergency Contact:	
Phone Number:	

Do not separate form! Bring entire form to event and submit to Group Leader
White = For Group Leader to Bring on Event
Yellow = Submit to S.U. Welcome and Information Center
Pink = Return to Participant