

**Event Date:**

Specific Potential Risks of the Event:

By participating in any Northern Arizona University activity, event, use of facilities or equipment, you are participating at your own risk AND acknowledge you have read, understand, and agree with the attached ASSUMPTION OF RISK, WAIVER, AND RELEASE FOR PARTICIPATION IN VOLUNTARY EVENTS including understanding the risks of serious personal injury; accepting personal and financial responsibility for those risks; agreeing not to sue, waive and release all claims against the State of Arizona, Arizona Board of Regents, and Northern Arizona University; grant the right to be photographed; understand medical care may not be immediately available; agree to pay for any medical costs as a results of participation; comply with Northern Arizona University's rules, standards, and instructions for behavior; take sole responsibility for such participation in the activity, event, or use of the facilities or equipment.

Note: Participants must be eighteen (18) years of age or older to participate in such activity, event, or use of the facilities or equipment.

Participant Name

Signature

Date

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**ARIZONA BOARD OF REGENTS FOR AND ON BEHALF OF NORTHERN ARIZONA UNIVERSITY
ASSUMPTION OF RISK, WAIVER, AND RELEASE FOR PARTICIPATION IN VOLUNTARY EVENTS**

***THIS DOCUMENT HAS LEGAL CONSEQUENCES. IT MUST BE COMPLETED AND SIGNED PRIOR TO PARTICIPATION.
PLEASE READ IT CAREFULLY BEFORE SIGNING.***

In consideration of being allowed to participate in the afore-mentioned Northern Arizona University Event ("Event"), which includes the specific potential risks listed above, I ("Participant"), on behalf of myself and my spouse, if any, and our heirs, successors, and assigns:

1. Acknowledge and understand that participation in the Event may involve a variety of activities. Such participation, particularly in sporting competitions and similar events, may involve risks, including but not limited to, serious personal injury, partial or permanent disability, sickness, disease or illness, property damage, and/or death. These risks may result from my own actions or inactions, from the actions or inactions of others, or may be inherent to participating in the Event. I also understand that Northern Arizona University is not an agent of and has no responsibility for any third party that may provide any services during the Event, including but not limited to, food, lodging, travel, and equipment associated with the Event. I understand that I am responsible for ensuring that I am properly prepared for all Event activities, and I represent that I am in good health and am able to participate fully in all Event activities.
2. Assume all the foregoing risks and accept personal and financial responsibility for all damages for personal injury, partial or permanent disability, property damage, or death, caused by me, to the fullest extent allowed by law.
3. Agree not to sue and to waive, release and indemnify the State of Arizona, the Arizona Board of Regents, Northern Arizona University, their boards, universities, officers, employees, agents, and assigns, for any and all claims, damages, personal injury, partial or permanent disability, sickness, disease or illness, property damage, or death, caused or alleged to be caused in whole or in part arising out of or in connection with my participation in, or travel to and from the Event. I understand that my participation in this Event is voluntary.
4. Grant to Northern Arizona University and to its employees, agents and assigns the right to photograph/video me and use the photograph/video and or other digital reproduction of me or other reproduction of my physical likeness for publication processes for use in connection with Northern Arizona University events, whether electronic, print, digital or via the Internet.
5. Understand that medical care facilities may not be immediately available, and I accept the increased risk that may pose in the event of injury.
6. Understand that Northern Arizona University does not have medical personnel available at the Event location, and I agree that any medical costs, including emergency medical treatment that may be incurred as a result of my participation in the Event will be my financial responsibility.
7. Hereby consent to Northern Arizona University and/or any appropriate medical facility providing whatever medical services they may deem necessary in the event of an emergency. I certify that I have adequate insurance and/or other means to pay for any costs and expenses related to these services and I agree to bear such costs and expenses in full.
8. Agree that I will comply with Northern Arizona University's rules, standards, and instructions for behavior, including the Student Code of Conduct, if applicable, as well as any specific standards of conduct of the Event that may be provided to me. The Student Code of Conduct can be found at: <https://nau.edu/university-policy-library/student-code-of-conduct/>. I understand that I am not permitted to consume alcohol, possess/use weapons, or illegal substances, or engage in sexual activities while participating in the Event. I agree that Northern Arizona University has the right, in its sole discretion, to enforce the standards of conduct described above, and that it may impose sanctions, up to and including expulsion from the Event or from Northern Arizona University, for violating these standards or for any behavior detrimental to or incompatible with the standards of Northern Arizona University or the Event. I understand that Northern Arizona University has the right to make changes to the format and administration of the Event.
9. Acknowledge and understand that it is Participant's sole responsibility to decline, decrease, or cease participation in the event of illness, injury, or other medical condition. Understand that Northern Arizona University may reduce or stop Participant's participation, in its sole discretion, in the best interests of safety or to aid in the well-being of other participants. Northern Arizona University may require further assessment and medical clearance from a physician prior to participation in the Event.
10. **ACKNOWLEDGE THAT I HAVE READ THE ABOVE ASSUMPTION OF RISK, WAIVER, AND RELEASE, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.**