

# SEMINOLE STATE COLLEGE OF FLORIDA AIKIDO CLUB WAIVER, RELEASE FORM

Name of Participant: \_\_\_\_\_

Name of Sponsoring Entity: Seminole State College of Florida  
Waiver, Release of All Claims and Hold Harmless Agreement  
Seminole State Aikido Club [Name of Program]

## READ CAREFULLY

Please read this form carefully and be aware that, in signing up and participating in the above program, you will be waiving and releasing all claims for injuries, arising out of this program that you or the above participant might sustain. The terms "I," "me," and "my" also refer to parents or guardians as well as the participants in the program. In registering for the program, you are agreeing as follows:

As a participant in the program, I recognize and acknowledge that there are certain risks of physical injury, and I agree to assume the full risk of any injuries, including death, damages or loss which I may sustain as a result of participating, in any manner, in any and all activities connected with or associated with such program. I further recognize and acknowledge that all athletic activities involving strenuous exertion or potential body contact are hazardous recreational activities and involve substantial risks of injury.

I agree to waive and relinquish any and all claims that I may have as a result of participating in the program against the Seminole State College of Florida [governmental unit], any and all other participating or cooperating governmental units, any and all independent contractors, officers, agents, servants and employees of the governmental bodies and independent contractors, and any and all other persons and entities, of whatever nature, that might be directly or indirectly liable for any Injuries that I might sustain while participating in the program (The parties described in the preceding sentence are referred to as "released parties" in the remainder of the Agreement.

I do hereby fully release and discharge the Seminole State College Aikido Club [governmental unit] and the other released parties from any and all claims for injuries, including death, damage or loss which I may have or which may accrue to me on account of my participation In the program.

I further agree to indemnify, hold harmless and defend the Instructors as well as any and all other released parties, including and not limited to, students of the Seminole State College Aikido Club, Visiting Instructors and visiting students, from any and all claims resulting from injuries, including death, damages and losses sustained by anyone, and arising out of, connected with, or in any way associated with my conduct and the activities of the program.

I further understand and agree that the terms such as "participation," "program," and "activities," referred to in this Agreement, Include all exercises and physical movements of any nature while I am participating in the program, and further include the provision of or failure to provide proper instructions or supervision, the use and adjustment of any and all machinery, equipment, and apparatus, and anything related to my use of the services, facilities, or premises involved in the program.

I understand the nature of the program for which I am registering, and have read and fully understand this Waiver, Release and Hold Harmless Agreement. I further understand that any advisements or warnings of the particular risks of this program that I subsequently receive will be incorporated by reference into and become a part of this Agreement.

[Signature of Participant] \_\_\_\_\_ Date \_\_\_\_\_

[Both Parents or One Custodial Parent, Date or Guardian Must Sign (if participant is under age 18)]

\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_