

Volunteer Participation  
Informed Consent/Waiver & Release

Participant's Name: \_\_\_\_\_

Event: (Describe the event/locations/dates) \_\_\_\_\_

\_\_\_\_\_

- In consideration of the acceptance of my voluntary participation in the above event/activity, I hereby waive, release and discharge any and all claims for damages for death, personal injury or property damage which I may have, or which may hereafter accrue to me, against the California State University, Northridge as a result of my participation in this activity.
- This release is intended to discharge the State of California, Trustees of the California State University; California State University, Northridge and their trustees, officers, employees and volunteers from and against any and all liability arising out of or connected in any way with my participation in the event/activity, even though that liability may arise out of the negligence or carelessness on the part of the University or persons mentioned above.
- I understand that participation in this event will include a great deal of physical activity. I further understand that accidents and injuries can arise out of this activity; knowing the risk, nevertheless, I hereby agree to assume those risks and to release and to hold harmless the University and persons mentioned above.
- It is further understood and agreed that this waiver, release and assumption of risks is to be binding on my heirs and assigns.

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date