



## San Jose/Evergreen Community College District Waiver of Liability, Assumption of Risk & Indemnity Agreement Required Activities Waiver

SSHAPE Se	ervice-Learning & Public Service			
Department Cla	ss/Activity	Dean Appro	oval/Receipt of S	igned Waiver
Waiver: In consideration of being permitted ( Complete description of	d to participate in any way in falloss or Activity, including date(s) and tran	nsportation (i	f any) )	
hereinafter called "The Activity," I, for my				_
waive, discharge, and covenant				
employees, and agents from <b>liability fro</b> (including death) to me, and property loss of	•	•	•	, or illnesses
<b>Assumption of Risks:</b> Participation in regardless of the care taken to avoid injur from 1) minor injuries such as scratches, broack injuries, heart attacks, and concussion	ies. The specific risks vary from one a ruises, and sprains 2) major injuries suc	ctivity to a h as eye inj	nother, but the ury or loss of s	e risks range
I have read the previous paragraphs and I The Activity. I hereby assert that my partic				e inherent in
Indemnification and Hold Harmless:   Community College District HAR costs, expenses, damages and lia involvement in The Activity and t	MLESS from any and all clain bilities, including attorney's fe	ns action ees brou	s, suits, pr ght as a res	ocedures, sult of my
<b>Severability:</b> The undersigned further exprintended to be as broad and inclusive as is is held invalid, it is agreed that the balance	permitted by the law of the State of Ca	lifornia and	that if any po	•
<b>Transportation:</b> I hereby acknowledge an providing the transportation, and it is my recollege is providing transportation but I do and the college assumes no responsibility of	esponsibility to arrange for my transponent of use the transportation, I am respo	rtation to a	nd from the ac	ctivity. If the
Acknowledgment of Understanding: I hav	e read this waiver of liability, assumpti	ion of risk,	and indemnity	agreement,
fully understand its terms, and <b>understa</b> l	nd that I am giving up substan	ntial right	ts, including	g my right
to sue. I acknowledge that I am signing complete and unconditional release of all I			d by my signa	ture to be a
Signature of Participant	Print Name of Participant		Pate	Age (if Minor)
Signature of Parent/Guardian of Participant if Minor	Print Name of Parent/Guardian of Participant	if Minor D	Pate	