RELEASE AND WAIVER OF LIABILITY
(Read carefully before signing)

The undersigned hereby acknowledges that participation in this course may involve inherent risk due to a field trip, physical activity of the use of tools and equipment and by the execution of the release hereby assumes all such risks. The undersigned further agrees that for the sole consideration of Clayton State University allowing the undersigned to participate in this program and/or physical education activities for which or in connection with which the university has made available any equipment, facilities, grounds or personnel for such programs and activities the undersigned while participating in any such programs or activities or to the undersigned hereby release and forever discharge Clayton State University and the Board of Regents of the University System of Georgia, its members officially and individually, and its offices, agents and employees of any and from all claims, demands, rights and causes of action of whatever kind or nature, arising from and by reason of any and all known and unknown, foreseen and unforeseen bodily and personal injuries, damages to property, and the consequences thereof, resulting from my or my child’s participation in or in any way connected with such recreational programs and/or physical education activities.

I understand that the acceptance of this release and waiver of liability by the Board of Regents of the University System of Georgia shall not constitute not be construed as a waiver, in whole or in part, of sovereign or official immunity by said Board, its members, officers, agents, and employees.

I CERTIFY THAT I HAVE READ AND UNDERSTAND THIS RELEASE BEFORE SIGNING THE SAME ON THIS __________ DAY OF ___________, ________.

__________________________
Name of Course

__________________________
Course Number

__________________________
Full Name of Participating Student

__________________________
Signature of Student (Parent/Legal Guardian must sign if learner is not 18 years of age)

Emergency Contact Information:

__________________________
Name of Contact

__________________________
Relationship to Student

__________________________
Phone Number

__________________________
Alternate Phone Number

Last Revised: 8/15/19