



# South Carolina State University Waiver of Liability, Assumption of Risk, and Indemnity Agreement

I, \_\_\_\_\_, acknowledge that I am a student at South Carolina State University (SCSU). I would like to participate in the following ACTIVITY:

\_\_\_\_\_ which is sponsored/organized by the \_\_\_\_\_ Department/Club and will take place on the following date(s)\_\_\_\_\_.

In consideration for being allowed to participate in this ACTIVITY, I the undersigned, acknowledge, appreciate and agree that:

1. I understand that participation in this ACTIVITY may carry with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, and I choose to voluntarily participate in this ACTIVITY with full knowledge that said ACTIVITY may be hazardous to me and my property. I voluntarily assume full responsibility for any risk of loss, property damage or personal injury, including death, which may be sustained by me as a result of my participation.
2. I certify that I have adequate health insurance necessary to provide for and pay any medical costs that may directly or indirectly result from my participation in this ACTIVITY.
3. I understand that this ACTIVITY is (may be) physically strenuous and I know of no medical reason why I should not participate.
4. I hereby release, waive, and discharge South Carolina State University and its Board of Trustees, its officers, agents, employees and representatives from all claims, demands, liabilities, rights and causes of action of whatever kind or nature, that may result from or occur during my participation in this ACTIVITY, whether caused by negligence of SCSU, its Board of Trustees, officers, agents, employees or representatives or otherwise. I also agree to indemnify and hold harmless SCSU for any loss, liability, damage or costs, including court costs and attorney's fees that may occur as a result of my negligent or intentional act or omission while participating in this ACTIVITY.

**I HAVE CAREFULLY READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AND HAVE HAD SUFFICIENT TIME TO SEEK EXPLANATION OF THE PROVISIONS CONTAINED ABOVE. AFTER CAREFUL CONSIDERATION, I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT ANY INDUCEMENT.**

\_\_\_\_\_ Age \_\_\_\_\_ Date Signed \_\_\_\_\_  
Participant's Signature

Signature witnessed by: \_\_\_\_\_ Witness

**If participant is under the age of 18, his or her parent or legal guardian must also sign:**

I, \_\_\_\_\_, am the parent or legal guardian of the participant who has signed above. I have read and I understand the Provisions of this document, I consent to the participant taking part in the ACTIVITY described above, and I fully enter into and agree to the above Assumption of Risk and Release from Liability.

\_\_\_\_\_ Date Signed \_\_\_\_\_  
Signature of Parent or Legal Guardian

Signature witnessed by: \_\_\_\_\_ Witness

In case of an emergency, please contact: \_\_\_\_\_ Relationship \_\_\_\_\_

Proof of Medical Insurance: \_\_\_\_\_ Insurance Company  
\_\_\_\_\_ Insurance ID#



**South Carolina State University**  
**Waiver of Liability, Assumption of Risk, and Indemnity Agreement**  
**(Field Trips/Excursions/Events or Activities)**

**GUIDELINES**

**GENERAL**

Students who refuse to complete required waiver agreement form shall be excluded from the event or activity.

**Club Activities**

Students participating in a club activity are required to complete **Form WA**. Signed forms shall be retained in the office of Campus Services and the office of Student Affairs.

**Athletics**

Students participating in athletic/sports programs are required to complete **Form WA**. Signed forms shall be retained in the office of Campus Services and the office of Athletics.

**Educational Programs**

- A. **Voluntary In-state Field Trip Participation**: Students who participate in voluntary field trips must complete **Form WA**. Signed forms shall be retained in the office of Campus Services.
- B. **Out-of-State Field Trips**: All students participating in an out-of-state field trip or excursion whether voluntarily or required must complete Form WA. Signed forms shall be retained in the office of Campus Services.
- C. **In-State Field Trips**: Students required to participate in field trips as a requirement of a course **are not required** to sign a waiver agreement form. Students required to report to other locations as a requirement of a course **are not required** to sign a waiver agreement form.
- D. Office initiating waiver agreement forms shall retain signed forms on file for one year from the date of the field trip/excursion.

**DEFINITION OF FORM WA**

Waiver of Liability, Assumption of Risk, and Indemnity Agreement

- Students participating in athletic/sports programs.
- Students who voluntarily participate in a school event or activity/excursion (not a course required field trip/excursion).
- Students participating in an out-of-state field trip/excursion as a requirement of a course.