



Release and Indemnification Agreement

This form is to be used for voluntary activities or events which increase the risk of injury and are not part of the individual's normal job duties or classroom curriculum. The Department or College should add any other identified risks associated with this activity, and delete those risks that do not apply.

I, _____, hereby acknowledge that I have voluntarily elected to participate in the _____ (the "Activity") associated with Truckee Meadows Community College ("TMCC") a member institution of the Nevada System of Higher Education ("NSHE"). I understand and agree that the Activity involves certain risks which include, but are not limited to, the following: (check, delete or add items as necessary)

- Traveling to and from the Activity (transportation is/is not provided by TMCC).
- Manual labor, including lifting, reaching, stretching, and moving objects. Individuals should be aware of own physical limitations.
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Voluntary Activity Waiver

I hereby acknowledge that I have read this entire document, that I understand its terms, that by signing it I am giving up substantial legal rights I might otherwise have, and that I have signed it knowingly and voluntarily.

Participant's Name: _____

Signature: _____ Date: _____

IF PARTICIPANT IS A MINOR

I am the parent or legal guardian of the Participant. I hereby acknowledge that I have read this entire document, that I understand its terms, that by signing it I am giving up substantial legal rights that I or the Participant might otherwise have, and that I have signed it knowingly and voluntarily. I allow Participant to participate in this Activity. I understand that I am responsible for the obligations and acts of Participant as described in this document. I agree to be bound by the terms of this document.

Guardian's Name: _____

Signature: _____ Date: _____