

Waiver of Liability, Assumption of Risk, and Indemnity Agreement Waiver:

In consideration of being permitted to participate in anyway in:

Activity Name	Location	Date
discharge, and covenant not to sue The Ca University; Cal State L.A. University Auxili "University"); it's officers, employees, and of The California State University, Board University, Los Angeles, Cal State LA University in personal injury, physical or psychological	alifornia State Universary Services, Inc.; Ca agents from liability of Trustees, Californiversity Auxiliary Schological injury, acci	lifornia State University, Los Angeles (collectively from any and all claims including the negligence
certain inherent risks that cannot be eliminat from one activity to another, but the risks ran major injuries such as eye injury or loss of si	ed regardless of the c nge from 1) minor inj ight, joint or back inju death. Nonetheless, I	assume all related risks, both known or unknown
		rstand, and appreciate these and other risks t my participation is voluntary and that
	sts, expenses, damage	FY AND HOLD University HARMLESS from any s, liabilities, travel to, from and during Activity activity and to reimburse them for any such
is intended to be as broad and inclusive as is	permitted by the law	oregoing waiver and assumption of risks agreement of the State of California and that if any portion tanding, continue in full legal force and effect.
risk, and indemnity agreement, fully underst including my right to sue including travel	and its terms, and un to, from and during intend by my signal	have read this waiver of liability, assumption of derstand that I am giving up substantial rights the Activity. I acknowledge that I am signing ture to be completed and unconditional release
Participant's Name (please print legibly):		-
Signature of Participant	Date	-
Signature of Parent/Guardian of Minor	Date	Participant's Age (if minor)