

Release and Hold Harmless Agreement/Waiver of Liability

I, the undersigned participant (or parent/guardian on behalf of the minor participant), request voluntary participation in the activity sponsored by *Concordia University Texas* (Participant and Activity are those referenced below).

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Participant: Name:	: Birth date	e:
Activity:		
Start Date:		
End Date:		
of serious injury or also from the action event or activity is be any risk concerns, I	participation in the Activity and acknowledge that I fully understand a death, including losses which may result not only from my own actions, inactions, or negligence of others, the condition of the facilities, being conducted, and/or the rules or nature of the type of event or ac should discuss the risks associated with my participation with the code and before the activity begins.	ons, inactions or negligence, but equipment, or areas where the tivity. I understand that if I have
Furthermore, I certify	in good health and have no physical condition that would prever fy that I have personal medical insurance to cover any injury or accide activity and I agree to use my personal medical insurance as a prima ury occurs.	nt that may occur because of my
responsibility for all for any losses resu	rstanding the risks involved with participation in the activity, I hereby risks and dangers associated with my participation in the activity. I a ulting from my actions and will indemnify Concordia University Tes, volunteers and agents, for any loss or damage caused by myself during the control of the con	gree I am financially responsible exas, and its trustees, officers,
IN CONSIDERATION OF MY PARTICIPATION IN THE ACTIVITY, I AGREE (ON BEHALF OF MYSELF AND MY HEIRS, SUCCESSORS, PERSONAL REPRESENTATIVES AND ASSIGNS), TO FULLY AND FOREVER RELEASE, HOLD HARMLESS, AND INDEMNIFY CONCORDIA UNIVERSITY TEXAS, ALL RELATED, AFFILIATED, PARENT AND SUBSIDIARY ENTITIES, INCLUDING BUT NOT LIMITED TO THE LUTHERAN CHURCH—MISSOURI SYNOD (LCMS), THE TEXAS DISTRICT OF THE LCMS, THE CONCORDIA UNIVERSITY SYSTEM AND EACH ENTITIES' PAST AND PRESENT BOARD MEMBERS, OFFICERS, DIRECTORS, EMPLOYEES, AGENTS, AND INSURERS (collectively "INDEMNITEES") FROM AND AGAINST ANY LIABILITY, DAMAGES, CLAIMS, LAWSUITS, COSTS (INCLUDING COURT COSTS, ATTORNEYS FEES AND COSTS OF INVESTIGATION), AND ACTIONS OF ANY KIND OR DESCRIPTION FOR ANY DAMAGE TO OR LOSS OF MY PROPERTY OR THE PROPERTY OF ANOTHER, ANY INJURY TO ME OR MY DEATH, OR THE INJURY TO OR DEATH OF ANY OTHER PERON OR ANY ONE OR MORE OF THE FOREGOING, AIRSING OUT OF MY PARTICIPATION FOR ANY PURPOSE IN THE ACTIVITY, INCLUDING ANY DAMAGE, LOSS OR INJURY CAUSED BY ANY ACT OR OMISSION ON THE PART OF INDEMNITEES, INCLUDING ANY NEGLIGENT CONDUCT OF CONCORDIA but excluding any gross negligence or willful misconduct of Indemnitees.		
This waiver and re Indemnitees is know	ease and hold harmless agreement and understand the terms used elease is freely and voluntarily given with the understanding that wingly given up in return for allowing my participation in the activity. It only myself but also my successors, heirs, representatives, administr	right to legal recourse against My signature on this document is
Participant Sign	nature:	Date:
I certify that I am the p Concordia University T	(If Participant is a Minor) carent/legal guardian of the above named participant and that I give my permis Texas activity. I have reviewed this completed form and certify the information D HARMLESS AGREEMENT/WAIVER OF LIABILITY FORM AND UNDERST	n is correct and I HAVE READ THE
Name	ne:	
Signs	ature.	Date: