



VENTURA COUNTY COMMUNITY COLLEGE DISTRICT

ACTIVITY LIABILITY WAIVER AND RELEASE AGREEMENT

ACKNOWLEDGMENT, RELEASE, HOLD HARMLESS AND ASSUMPTION OF POTENTIAL RISK AGREEMENT

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(Print Student Name and Student I.D. Number)

- Location:     Moorpark College                       Oxnard College  
                   Ventura College                               District Administrative Center
- Fall Term                                       Spring Term                                       Summer Term

Activity/Event: \_\_\_\_\_

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Date(s) or Period of Time: \_\_\_\_\_

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An Activity Liability Waiver and Release Agreement must be completed for each event (may cover multiple dates for same event) or one per school term.

I, the undersigned wish to participate in the District-approved event or activity as referenced above (hereinafter referred to as "Activity").

I understand and acknowledge that this Activity is voluntary and may be dangerous and hazardous and, by its very nature pose the potential risk of severe and serious physical and emotional injury/illness, or even death, to all individuals who participate in such Activity. I am aware that no District coverage for medical treatment of liability is provided in connected with this Activity.

I understand and acknowledge that in order to participate in this Activity I agree to assume all liability and responsibility for any and all potential risks, injuries or even death which may be associated with participation of such Activity. I represent and warrant that Student/Participant is mentally and physically fit, capable, able, and willing to participate in this Activity without any limitations.

I understand, acknowledge, and agree that the District, its Governing Board, employees, agents, coaches, teachers, volunteers, or representatives shall not be liable for any injury/illness suffered by Student/Participant which is incident to and/or associated with preparing for and/or participating in this Activity.

I hereby release, discharge, indemnify, and agree to hold harmless the District, District's Governing Board, College and each of their employees, agents, coaches, teachers, volunteers, and representatives free from any and all liability arising out of or in connection with Student/Participants' participation in the Activity, including all related activity such as games, practices, training activities, trips, related exercise, student fundraisers, or any other activity or event. For purpose of this Release, liability means all claims, demands, losses, causes of action, suits, or judgments of any kind that Student/Participant or Student/Participant's parents, guardians, heirs, executors, administrators, and assigns may have against District, Governing Board, College, and employees, agents, coaches, teachers, volunteers, and representatives because of Student/Participant's personal, physical, or emotional injury, accident, illness or death, or because of any loss of or damage to property that occurs to Student/Participant or his or her property during Student/Participant's participation in the Activity that may result from any cause including but not limited to District's Governing Board, College's, employees, agents, coaches, teachers, volunteers, or representatives own passive or active negligence of other acts other than fraud, willful misconduct or violation of the law.

Student/Participant and/or parents or guardians who do not wish to accept the risks described in this Agreement should not sign this Agreement, and will not be allowed to participate in the Activity.

I acknowledge that I have carefully read this voluntary activities participation form and that I understand the potential dangers incident to engaging in this Activity, am fully aware of the legal consequences of this agreement, and agree to its terms and understand I am waiving certain rights and assuming the risk of damage from my participation in the Activity.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature (if student under 18 years of age)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervising District Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Division Department/Manager

\_\_\_\_\_  
Date

\_\_\_\_\_  
President or Vice President

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director of General Services

\_\_\_\_\_  
Date

If a Student/Participant is a minor, then parent or guardian must sign. If Student/Participant is an adult (18 years of age or older), no signature of parent or guardian is required.