

**MURRAY STATE UNIVERSITY REGISTERED STUDENT ORGANIZATIONS
AGREEMENT AND RELEASE OF LIABILITY**

1. Facilities and activities offered at/sponsored by Murray State University Registered Student Organizations (“RSOs”) include the involvement in various activities coordinate and put into place by the RSOs, collectively referred to as “activities”. I understand that activities may be unsupervised. I also am aware that activities take place at a location remote from medical care and involve risk of injury including a risk of death or serious injury, and the possible negligent or reckless conduct of others. I voluntarily choose to participate in the activities of my choice.
2. I declare myself to be physically sound and suffering from no condition, impairment, disease, infirmity, or illness that would prevent my participation in the activities of my choice. I acknowledge that I should have my physician’s approval for my participation in any activities. I acknowledge that I have either had a physical examination and have been given my physician’s permission to participate in the activities of my choice, or that I have decided to participate in activities without the approval of my physician and do hereby assume all responsibility for my participation in the activities of my choice. I also acknowledge that I should regularly consult my physician as to the advisability of continued activities, especially if there is any change in my physical condition. I acknowledge that maintaining good medical insurance coverage is important for all individuals involved in activities.
3. I understand that RSOs allowing me to participate in any activities does not constitute an acknowledgement, representation, or indication of my physical well-being, or a medical opinion relating thereto. I further agree to any member/advisor of said RSO to contact the Emergency Contact Person, as indicated below, or arranging for medical care or emergency transportation if, in the sole discretion of Coordinators for RSOs, it is deemed appropriate for my health and/or well-being.
4. I additionally acknowledge that I have the following personal obligations as a participant in activities coordinated by RSOs:
 - A. To follow any instructions or directions which may be given to me by RSO members or advisors regarding activities or otherwise;
 - B. To perform activities at the intensity level appropriate for my general health and physical condition;
 - C. To immediately cease activity if I feel dizzy, nauseous, or faint, or experience rapid heartbeat, shortness of breath, headache, or any other physical symptom;
 - D. Not to participate coordinated by RSOs during any period that I am under the influence of alcohol or drugs or taking any prescription medication unless specifically approved by my physician;
5. In consideration of being allowed to make use of RSOs and to participate in any activities coordinated by RSOs, and in addition to any donation and/or payment of any fee or charge, I on behalf of myself, my heirs, personal representatives, estates and assigns, (collectively the “releasing parties”) do hereby forever release, discharge, and covenant not to sue Murray State University; its Board of Regents and individual Regents; its officers, employees, agents, and representatives, including all employees involved with RSOs; and all other persons and entities (collectively the “release parties”) from and with respect to any and all present and future expenses, claims, and causes of action, of whatever nature and kind and regardless of the basis therefore, including, but not limited to, any expenses, claims, and causes of action based upon any wrongdoing or negligence, including gross negligence, on the part of the released parties or any of them, including but not limited to any expenses, claims and causes of action for injury to property or injury or death to person, arising from or in any way related to my presence or participation in any activities involved with RSOs, any occurrences or events with RSOs, the condition or security of RSOs or any of its facilities or equipment or surrounding property, any activities of RSOs, and any and all other actions or inactions at or in any way relating to RSOs or their surrounding property (collectively the “release claims”). The releasing parties and each of them further agree to indemnify and hold harmless the released parties, and each of them, in the event any demand is made against the release parties or any of them related in any manner to or arising directly or indirectly from any release claims, even if it is alleged or established that any such demand arises from the negligence, including gross negligence, or other wrong doing of the released parties or any of them.

Print Name: _____ Phone: _____

Signature: _____ Date: _____

Address: _____

Emergency Contact Name: _____ Phone: _____

IMPORTANT NOTICE: THIS IS A BINDING LEGAL AGREEMENT AND RELEASE. IF YOU HAVE ANY QUESTIONS REGARDING IT,
YOU SHOULD SEEK THE ADVICE OF YOUR ATTORNEY PRIOR TO SIGNING IT.
BY SIGNING THIS DOCUMENT I AFFIRM THAT I AM EIGHTEEN (18) YEARS OF AGE OR OLDER AND DO HEREBY AGREE TO ITS
TERMS AND CONDITIONS.