

Activity.

## **ChSCC Student Activity/Event Participation**

Release/Hold Harmless Agreement

Release executed by	(full name of individual), of
	(full address) to Chattanooga State
Community College, Chattanooga, Tennessee (	"Institution")
I am voluntarily participating in the ChSCC stud Services Division, specifically:	ent activity sponsored/organized through the Institution's Studen
_	e Activity, which include, but are not limited to, travel. I further occur during this type of Activity and that participants in this

I assure officials of this Institution that there are no health-related reasons or problems which preclude or restrict my participation in this Activity.

Activity occasionally sustain mortal or serious personal injuries and/or damage as a result of participating in this

I understand and agree that the Institution does not have medical personnel available at the location of this Activity. I understand and agree that the institution's employees are granted permission to authorize emergency medical treatment, if necessary, and that this action shall be subject to the terms of this Agreement. I understand and agree that the Institution and its employees assume no responsibility for any injury or damage which might arise out of, or in connection with, any authorized emergency medical treatments.

I assure officials of the institution that I have adequate health insurance necessary to provide for and pay any medical costs that may directly or indirectly result from my participation in this Activity and that I indemnify and hold the Institution harmless.

To the extent permitted by law and knowing the risks of this Activity, I hereby release, waive, forever discharge, covenant not to sue and agree to hold harmless the Institution, including its governing board, officers, agents, and employees from any liability whatsoever arising out of my participation in this Activity, or in transit to or from this Activity, including, but not limited to, medical bills, court costs, and attorney's fees, any damage to my property or the property of others and injury to me or to others, including loss of limb or life, resulting from my negligence or the negligence of others, or to others through my participation in this Activity.

It is my express intent that this release and hold harmless agreement shall bind the members of my family, and my spouse, if I have one, if I am alive, and my estate, heirs, administrators, personal representatives or assigns, if I am deceased, and shall be deemed as a release, waiver, discharge and covenant not to sue the Institution. I further agree to save, and hold harmless, indemnify and defend the Institution from any claim by me, or by my family, arising out of my participation in this Activity.

I further agree that this Agreement shall be construed in accordance with the laws of the State of Tennessee. If any term of this Agreement shall be held illegal, unenforceable or in conflict with any law governing this Agreement, the remaining provisions shall remain in full force and effect.

In consideration of my participation in this Activity, I execute this document with full knowledge of the contents and consequences stated in this Release.



## THIS IS A RELEASE READ BEFORE SIGNING

IN WITNESS THEREOF, I have executed this Release on	(Date).
STUDENT/PARTICIPANT:	
Student/Participant Printed Name	
Student/Participant Signature	
IF STUDENT/PARTICIPANT IS UNDER 18 YEARS OF AGE:	
Parent/Guardian Printed Name	
Parent/Guardian Signature	
WITNESS:	
Witness Printed Name	
Witness Signature	