WCU Sponsored Activities & Events



Summer Bridge Programs

COVENANT NOT TO SUE, WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

In consideration of being allowed to participate in WCU Summer Bridge Programs, sponsored activities, trips, and/or events (which may include but is not limited to, class field trips, service learning projects, intramural programs, cookouts, hiking, biking, bowling or other recreational activities) (collectively, the "Programs"), I hereby enter into this covenant not to sue (the "Agreement"), and agree to release, hold harmless, and forever discharge from negligence to the fullest extent permitted by law, the State of North Carolina, the Board of Governors of the University of North Carolina, the Board of Trustees of Western Carolina University, its auxiliary organizations, and the officers, directors, employees and agents of all of them, (collectively referred to as the "Releasees,") from all legal and/or administrative liability relating to my participation in the Programs.

Knowing, understanding, and fully appreciating all possible risks, I hereby expressly, voluntarily, and willingly assume all risks and dangers, both known and unknown, associated with my participation in the Programs, even if arising from the negligence of the Releasees. The risk of injury from the activities involved in this program is significant, including the potential for permanent disability, paralysis and death. I further acknowledge that my participation in the Programs is contingent upon accepting this Agreement.

I also agree to fully indemnify the Releasees in any event where the Releasees' liability is associated with my participation in the Programs to the fullest extent permitted by law.

<u>I have read this waiver and release and understand the terms used herein and their legal significance.</u> This waiver and release is freely and voluntarily given with understanding that right to legal recourse in a court of law or administrative agency against the Releasees is knowingly waived in return for allowing my participation in the Programs.

My signature on this Agreement is intended to bind not only myself but also my successors, heirs, representatives, administrators and assigns. Further, I agree that if any part of this Agreement is declared unenforceable or invalid, the remainder will continue to be valid and enforceable. Finally, the language in this Agreement shall be construed neutrally, and without regard to the party who drafted the Agreement.¹

Student Full Name (print):	WCU ID No: <u>920</u>	
Student's Cell Phone:		
Student's Signature	Date	
Parent (or Legal Guardian) Name (print), if student is under 18:		
Parent (or Legal Guardian) Signature, if student is under 18:		Date
Emergency Contact Information: (Please list a contact in case of en	nergency)	
Contact's Name (print):	_ Relationship to Student:	
Contact's Phone (please identify cell, work, etc.):		_
Authorization for Medical Treatment (Parent or Legal Guardian r		
In the event of injury or illness, I give permission for my son/daugl	nter (circle one) to receive m	nedical attention.
Parent (or Legal Guardian) Signature, if student is under 18:		Date

¹ Please complete and return this form: Scan and Email to **summerbridge@wcu.edu**; or Fax to 828.227.7101, or mail to Office of Student Retention, 214 Killian Annex – Western Carolina University – Cullowhee, NC 28723