

RELEASE AND ASSUMPTION OF RISK
ARISING FROM PARTICIPATION IN:

I, _____, intend to participate in _____

to be held on _____ on _____
(Date)

In consideration of the University of Arkansas allowing me to engage in this activity, I agree to assume all risks incident to the above described activity (including the risk of personal injury and/or property damage) and agree to release and hold harmless the University of Arkansas and any of its trustees, officers, employees, or agents from any liability for any injuries to my person or property that I might sustain while participating in the above-described activity. This release and assumption of risk shall bind myself, my heirs, my assigns, and my personal representatives.

Date

Name (please print)

Signature

Signature of Parent or Guardian (if under 18)