

**RELEASE OF ALL CLAIMS FOR PERSONAL INJURY AND
PROPERTY DAMAGE**

**PARENT OR LEGAL GUARDIAN CONSENT FOR PARTICIPATION:
IN ARKANSAS STATE UNIVERSITY-SPONSORED EVENTS**

DATE: _____ ACTIVITY: _____
VENUE: _____

As the parent or legal guardian of _____,
(Participant's Name)

I give my consent and approval for _____
(Participant's Name)

to participate in the above-listed activity(ies) hosted by Arkansas State University.

I recognize and acknowledge that certain risks of personal physical injury, property damage, or other losses, up to and including death, exist with respect to participation in the activity(ies) and further agree to:

Assume all risks of any such personal injuries, property damages, or other losses that participant may sustain as a result of participation in these activity(ies), including all losses incurred while entering, exiting, or being present in the Arkansas State University-sponsored activity(ies).

Fully release and discharge Arkansas State University-Jonesboro, the ASU System, its Board of Trustees, its officers, agents and employees (hereinafter collectively referred to as the "College") from any and all claims from personal injuries, property damages or other loss that I may suffer on account of participation in said events including losses incurred while entering, exiting, or being present in the Arkansas State University-sponsored activity(ies).

Indemnify and hold harmless the College, from all claims, suits, actions, injuries, damages, and losses sustained and arising out of, connected, with, or in any way associated with my participation in said activity(ies) including losses incurred while entering, exiting, or being present in the Arkansas State University-sponsored activity(ies).

HAVE FULLY READ AND UNDERSTAND THE FOREGOING.

Name of Parent or Legal Guardian (Print)

Signature of Parent or Legal Guardian

Date