## Mt. Hood Community College Health and Physical Education Department PARTICIPANT AGREEMENT, ACKNOWLEDGEMENT OF RISK AND GLOBAL LIABILITY RELEASE

| Na        | ame   | Date   |  |
|-----------|---|--|--|
| ma<br>on  | aterials) and to receive any of the related services of Mt. Hood Co   | activities outlined in the course above (and described in further detail in ommunity College, its agents, owners, officers, employees, and all other red to as "College"), I hereby agree to release and discharge College, on   | persons or entities acting in any capacit  |
| 1.        | risks which could result in injury, death, illness, disease, emol limited to, obstacle courses, rock climbing, mountain biking, concerns about the activities entailed in this course, I will specourse or the course's activities, which I, and any minor child activity and/or using the animals and/or equipment. I/We par | ticipating in as part of the above described course and the activities it ent<br>tional distress, or damage to myself, to property or to third parties. The<br>use of watercraft, and other activities in wilderness locations. I understa<br>ak with the instructor prior to my engagement in those activities. In recu<br>tren for which I am responsible, will engage in, I confirm that I am (we a<br>ticipate willingly and voluntarily and I assume full and complete respon<br>limitation that may affect your ability to fully participate in this course,   | activities could include, but are not and that if I have any questions or ognition of the inherent risks of this are) capable of participating in the sibility for my/our personal injury, |
| 2.        | emergency; treatment may be several hours or days away. W   | st aid training, they are not trained in extensive emergency medical procedular procedul | ermission to the guides, instructors, and  |
| 3.        | the activities. I understand my participation in this course and<br>any injuries that I sustain may be compounded or increased be<br>or facilities due to the location of the planned course activities   | ently dangerous and involve various risks which cannot be controlled or d subsequent participation in course activities could result in my death or y rescue efforts and/or the provision of emergency medical treatment or s and agree to hold the College harmless from such acts and omissions a escue efforts, or the provision of any emergency medical treatment.  | r serious physical injury. I understand<br>the lack of available formal medical car  |
| 4.        | I expressly knowingly and intelligently assume the following: College property.   | all risks of travel associated with this course as I understand many facets  | s of the curriculum will take place off of   |
| 5.        | I expressly agree and promise to accept and assume all of the r is forcing me to participate, and I elect to participate in spite of  | risks existing in this activity. My participation in this course and the couf the risks.   | rse's activity is purely voluntary, no on  |
| 6.        |   | old harmless and indemnify College and the HPE Medical Director from<br>or are in any way connected with my participation in this course or the co<br>llege and/or the HPE Medical Director.   |  |
| AC<br>DII | CTIVITY, I WILL HAVE NO RÍGHT TO MAKE A CLAIN   | T IF ANY ONE IS HURT OR PROPERTY IS DAMAGED DURIN<br>M OR FILE A LAWSUIT AGAINST COLLEGE, ITS AGENTS, O<br>ENTITY ACTING IN ANY CAPACITY ON ITS BEHALF EVEN  | WNERS, OFFICERS, MEDICAL   |
| 7.        | Should College, or anyone acting on its behalf, be required to and costs.   | incur attorney's fees and costs to enforce this agreement, I agree to inder  | nnify and reimburse them for such fees   |
| 8.        | Regardless of the location of any activity, I agree that the laws<br>District Court for Multnomah County, Oregon.   | s of the State of Oregon shall apply and that jurisdiction in any claims co  | ncerning this activity will be in the State  |
| 9.        | to bear the costs of such injury or damage myself, or that I ha   | cover any bodily injury or property damage I may cause or suffer while power been advised that the activities related to the above described course where will be no coverage by any College insurance policy for any damage   | carry risks to my person as outlined   |
| I ho      |   | od Community College to use my name, photo, or information about n<br>formation will be used only for promotion of Mt. Hood Community C  |  |
| Pe        | erson to notify in case of emergency  | Relationship   | Phone  |
|           |   | ity to read this entire document, that I have read it, and that I understa<br>signature to be a complete, absolute and unconditional release of liab   |  |
| -         | SIGNATURE of Participant  | Participant Name PRINTED   | Date   |
| =         | Address   | Phone  | Age  |