<u>University of Cincinnati Mountaineering Club Release and Indemnity</u> in Connection With a Student Trip, Outing and/or Activities

As a member of the University of Cincinnati Mountaineering Club (UCMC), I will/may participate in the following: backpacking, rock climbing, canoeing, hiking, kayaking, rafting, caving, mountain-biking, downhill or cross-country skiing, snowboarding, snow shoeing, mountaineering hang gliding, ice climbing, skydiving, geocaching, and/or any other club activities* at state and national parks, forests and other recreational areas or venues.

I agree to the following:

- 1) I (We) voluntarily accept and assume the risk for any injury I may receive as a result of my participation in the above described or any other club activities*.
- 2) I (We) release the University of Cincinnati (UC), the UC Mountaineering Club, and their trustees, officers, employees, members, and agents from all liability for any injury I may receive as a result of my participation in the above described or other activities and agree to hold them harmless and indemnify them for any claim made against them by virtue of my conduct in connection with my participation in the above described activities.
- 3) I (We) acknowledge that the University requires that I (we) obtain my (our) own health Insurance coverage (i.e., student health plan, family coverage, etc.)4) I (We) have received, read, and agreed to the UC Mountaineering Club Equipment/Gear

	Policies Initials	S				
5)	I (We) agree to abide by all relevant UC, UCMC rules, specific event, and equipment safety					
	policies, procedures, and practi	ces	Initi	als		
6)	I (We) agree to not allow other UCMC members or non-members, who have not signed the					
	UCMC waivers/agreements, to	use or borrow	the UC M	lountaineering	Equipment/Gear or	
participate in club events/tripsInitials						
Drint	t Name	Signature of Partic	non+**		Birthdate**	
F11111	t Name	Signature of Fartic	pani		Diffidate	
UC M#. If not a UC student Driver's License #		E-mail Address				
Local/School Address (apt/room/dorm #)		(() Cell/Phone Nur	() Cell/Phone Number	
City			State	Zip Code	Today's Date	
Verit	fication of Members ID:UCMC Exec Sig	gnature/Initials				

^{*}Any other club activities will be understood to mean any and all activities that you as a member could be involved in on a UCMC trip/activity, whether or not it is listed.

^{**} Persons who are younger than 18 years of age need to have an accompanying signature of parent or guardian.