**Waiver, Release and Hold Harmless Agreement**

In consideration of permission granted by Purdue University allowing me to participate

In  **,** which will occur on which is sponsored by **Housing & Residential Education**, (together with my parent or guardian, if I am under the age of eighteen or under a legal disability) represent, covenant and agree, on behalf of myself and my heirs, assigns, and any other person claiming by, under or through me, as follows:

1. I acknowledge that participating in the Activity involves certain risks (some of

which I may not fully appreciate) and that injuries, death, property damage or other harm could occur to me or others. I accept and voluntarily incur all risks of any injuries, damages, or harm which arise during or result from my participation in the Activity, regardless of whether or not caused in whole or in part by the negligence or other fault of Purdue University, The Trustees of Purdue University, and/or its or their departments, trustees, affiliates, employees, officers, agents or insurers ("Released Parties").

2. I waive all claims against any of the Released Parties for any injuries, damages,

losses or claims, whether known and unknown, which arise during or result from my

participation in the Activity, regardless of whether or not caused in whole or part by the

negligence or other fault of any of the Released Parties. I release and forever discharge the Released Parties from all such claims.

3. I agree to indemnify and hold the Released Parties harmless from all losses,

liabilities, damages, costs or expenses (including but not limited to reasonable attorneys' fees and other litigation costs and expenses) incurred by any of the Released Parties as a result of any claims or suits that I (or anyone claiming by, under or through me) may bring against any of the Released Parties to recover any losses, liabilities, costs, damages, or expenses which arise during or result from my participation in the Activity, regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties.

4. I have carefully read and reviewed this Waiver, Release and Hold Harmless

Agreement. I understand it fully and I execute it voluntarily.

EXECUTED this \_\_\_\_\_\_\_\_\_\_ day of August, 2024.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature Student’s Printed Name

Parent or Guardian Signature (if applicable) Parent/Guardian Printed Name

**Please list an emergency contact. He/She/They should not be someone traveling with the participant.**

|  |  |  |
| --- | --- | --- |
| **EMERGENCY CONTACT #1:** | | |
|  |  |  |
| **Student Name (Printed Name)** | **Relationship to Participant** | **Phone Number** |
| **EMERGENCY CONTACT #2:** | | |
|  |  |  |
| **Student Name (Printed Name)** | **Relationship to Participant** | **Phone Number** |