HILLSBOROUGH COMMUNITY COLLEGE

ASSUMPTION OF RISK AND RELEASE
FIELD TRIPS AND OFF-CAMPUS ACTIVITY

NAME:_____
First Last

READ CAREFULLY BEFORE SIGNING

I, the undersigned, in full recognition and appreciation of the dangers inherent to participation in Intercollegiate Athletics at Hillsborough Community College and during transportation to and from participating schools to which I may be exposed during my enrollment and/or participation in Intercollegiate Athletics for the academic year_____, do hereby agree to assume all of the risks and responsibilities surrounding my participation in_____(sport) or any independent activities undertaken as an adjunct thereto; and, further I do for myself, my heirs and personal representative(s) hereby defend, hold harmless, indemnify and release and forever discharge Hillsborough Community College, and all its officers, agents and employees from and against any and all claims, demands and actions or cause of action on account of damage to personal property, or personal injury or death which may result from my participation, and which result from causes beyond the control of, and without the fault or negligence of the College, its officers, agents or employees during the period of my participation as aforesaid.

I have read this entire release, understand it and sign it voluntarily with knowledge of its meaning and content.

Athlete: _____ _____
Signature Date

The signature of the student's parent or guardian is required if the student is under 18 years of age or if the student is at least 18 years of age and is a dependent as defined by Section 152 of the Internal Revenue Code of 1954.

Parent/Legal Guardian: _____ _____
Signature Date