Waiver and Release

Participant’s Name: ________________________________________________________

Event: CSUN/NCOD 5K Sign & Run, 4/18/10 from 8:00 AM to 2:00 PM
NCOD Scholarships fundraiser will take place on campus roads and sidewalks.

In consideration of the acceptance of my voluntary participation in the above captioned CSUN/NCOD 5K Sign & Run, I hereby waive, release and discharge any and all claims for damages including death, personal injury or property damage which I may have, or which hereafter accrue to me, against the California State University, Northridge as a result of my participation in the above captioned CSUN/NCOD 5K Sign & Run.

This release is intended to discharge the State of California, the Trustees of the California State University, California State University, Northridge, the National Center on Deafness (NCOD) and all sponsors, officials, their officers, employees, representatives and volunteers, and any other involved municipalities or public agencies from and against any and all liability arising out of or connected in any way with participation in the CSUN/NCOD 5K Sign & Run, even though the liability may arise out of negligence or carelessness on the part of persons or organizations mentioned above.

I am voluntarily participating in this CSUN/NCOD 5K Sign & Run. I understand that there are risks associated with my participation in this Activity, such as physical and/or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability, death or economic loss. These injuries or outcomes may arise from my own or other’s actions, inactions, or negligence, or the condition of the Activity location(s) or facility(ies). Nonetheless, I assume all risks of my participation in this Activity, whether known or unknown to me, including travel to and from the Activity (including air travel) or any events incidental to this Activity. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns.

If Participant is a minor, Parent or legal guardian must sign this release.

I am the parent or legal guardian of the Participant. I have read this document, and I am signing it freely. I understand the legal consequences of signing this document, including (a) releasing the University from all liability on my and the Participant’s behalf, (b) waiving my and the Participants’ right to sue the University, (c) and assuming all risks of Participant's participation in this Activity, including travel to and from the Activity (including air travel) or any events incidental to this Activity. I allow the Participant to participate in this Activity. I understand that I am responsible for the obligations and acts of the Participant as described in this document. I agree to be bound by the terms of this document.

THIS IS A RELEASE OF YOUR RIGHTS. READ CAREFULLY BEFORE SIGNING.

_________________________________   _____________________________
Parent or Adult Participant Signature    Date

__________________________________   ______________________________
Witness        Date