



MEMBERSHIPS RISK AGREEMENT

Lambright Intramural Center

State of Louisiana

Parish of Lincoln

ASSUMPTION OF RISK

In consideration of the Campus Recreation Department of Louisiana Tech University: Louisiana Tech University, the faculty, staff, Graduate Assistants, Student Assistants, or other Department of Campus Recreation parties hereinafter referred to as Organizer, allowing the undersigned, hereinafter referred to as Participant, to engage in various athletic endeavors, including but not limited to athletic games, events, meets, practice sessions, conditioning sessions, facility rental, facility usage, and activities incidental thereto, the undersigned agrees to the following:

1. Participant recognizes and understands that certain risks of harm are inherent and that there is a danger involved that cannot be fully foreseen and over which the Organizer has no control, which could result in property damage, bodily injury, or death while using this facility.

2. PARTICIPANT UNDERSTANDS THAT THERE ARE DANGERS AND INHERENT RISKS IN PRACTICING IN ANY ACTIVITY INVOLVED IN WHILE USING THE CAMPUS RECREATION FACILITIES BUT ARE NOT LIMITED TO DEATH, SERIOUS NECK AND SPINAL INJURIES WHICH MAY RESULT IN COMPLETE OR PARTIAL PARALYSIS, BRAIN DAMAGE, SERIOUS INJURY RELATED TO THE EYE AND/OR HEAD, SERIOUS INJURY TO VIRTUALLY ALL INTERNAL ORGANS, SERIOUS TO ALL BONES, JOINTS, LIGAMENTS, MUSCLES, TENDONS, AND OTHER PARTS OF THE MUSCULAR/SKELETAL SYSTEM, AND SERIOUS INJURY OR IMPAIRMENT TO OTHER ASPECTS OF MY BODY AND GENERAL HEALTH AND WELL BEING.

3. The Organizers strongly suggest that the Participant seek medical advice prior to engaging in any part of the various athletic endeavors, including but not limited to athletic games, events, meets, practice sessions, conditioning sessions, and activities incidental thereto while using any Campus Recreation facility.

4. Participant agrees to assume all risks and responsibility for any and all claims for damages, including personal injury or death, medical expenses, disability, lost wages, loss of earning capacity and property damages which may be incurred by Participant while Participant engages in any activity, athletic games, events, meets, practice sessions, conditioning sessions, and travel associated with facility usage during its designated reserved date and time. The Department of Campus Recreation is not responsible for any property damage to or loss of a vehicle while legally or illegally parked on University property.

5. I have read the above agreement and have willingly signed the same for the consideration expressed and with a full understanding of its purpose. I represent that I am at least 18 years of age and otherwise competent to execute this instrument, or that a legal and competent parent or guardian has also signed this agreement. I also understand that I am responsible for all minor children within my care during the usage of any Campus Recreation Facility.

Participant Name: _____ Date: _____
(Print)

Legal Parent or Guardian's Signature: _____

It is the responsibility of the above signed to ensure that each participant is aware of all Policies and Procedures concerning the utilization of this and all Campus Recreation Facilities.

