## GROSSMONT COLLEGE WELLNESS INITIATIVE GROUP ACTIVITY RELEASE OF LIABILITY, WAIVER OF RIGHT TO SUE, ASSUMPTION OF RISK

Name of Activity:

In consideration for being allowed to participate in this Activity, I release from liability and waive my right to sue Grossmont-Cuyamaca Community College District and its employees, officers, volunteers and agents (collectively the "District") from any and all claims, including claims for the District's negligence, resulting in any physical injury, illness (including death) or economic loss that I may suffer because of my participation in this Activity, including any travel to and from the Activity.

I am voluntarily participating in this Activity. I understand that there are risks, such as physical and/or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability or even death, which may occur from my participation in this Activity. These injuries or outcomes may arise from my own or other's actions, inactions, negligence, or from the condition of the Activity location(s) or facility(ies). Nonetheless, I assume all related risks, whether known or unknown to me, of my participation in this Activity, including travel to and from the Activity.

I agree to hold the District harmless from any and all claims, loss or damage to my personal property, liabilities and costs, including attorney's fees, as a result of my participation in this Activity, including travel to and from the Activity. If the District incurs any of these types of expenses, I agree to reimburse the District.

If I need medical treatment, the District is authorized to obtain medical treatment for me. I will be financially responsible for any costs of such treatment. I agree that I will not hold the District responsible for any claims resulting from any medical treatment.

I am 18 years or older. I have read this document, and I am signing it freely. I understand the legal consequences of signing this document, including (a) releasing the District from all liability, (b) waiver of my right to sue the District, (c) and assumption of all risks of participating in this Activity, including travel to and from the Activity.

I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms.

Participant Name:	Date:	
Signature:		