CONSENT TO USE ATHLETIC FACITILIES AT ANNA MARIA COLLEGE

CONSENT, RELEASE FROM LIABILITY AND INDEMNITY AGREEMENT REGARDING PARTICIPATION IN VOLUNTARY COLLEGE RECREATIONAL ACTIVITIES INCLUDING COLLEGE INDOOR FACILITIES AND OUTDOOR GROUNDS

Anna Maria College (the "College") wishes to emphasize that my participation in the **Fuller Activity Center Fitness Area** is purely voluntary, and participation is not required or expected of any employee. By signing this form, I hereby acknowledge my participation in any activities in the **Fuller Activity Center Fitness Area** is purely voluntary and relates to recreational activities for my personal enjoyment, and that I have in no way been required or requested by the College to participate in such activities. I understand that the College is giving me the opportunity to participate on a voluntary basis.

I acknowledge that with any sport activity there is a risk of injury, and I assume that risk. I state that I am presently physically fit to participate in the activity, and that I have the necessary skills to participate in the level of activity in which I have enrolled.

Accordingly, I agree that if I suffer any injury while engaging in these activities, I will not, in connection to such injury, file any claim or commence any action of any kind in court or any forum of any kind against the College and/or agents and employees of the College, and I shall hold them harmless against any such claims.

I further acknowledge that because I am an employee at Anna Maria College, the College's policies and procedures as found in the Employee Guidelines and all published updates thereafter apply on any trip or activity I participate in, whether on or off campus. I understand that if I violate any of Anna Maria College's policies, I may be subject to disciplinary action at Anna Maria College up to and including termination.

Finally, I acknowledge that I have health insurance and understand that I must keep such insurance in place during my participation in the activity.

Employee/Student Name: _____

Employee/Student Signature: _____

Date: _____