Read this Acknowledgement and Release carefully and in its entirety. It is a binding legal document. After reading the information below, sign your name, acknowledging that you assume all risks associated with your participation In the above referenced event/activity ("ACTIVITY") and that you release the State of Oregon, acting by and through the State Board of Higher Education, on behalf of Oregon State University, its employees, directors, officers, and agents ("OSU") of any and all liability resulting from your participating in the ACTIVITY. If you are under the age of 18, your parent or legal guardian must sign for you.

By signature below I acknowledge my participation in the ACTIVITY may expose me to actions, events and environments that may be hazardous to my person and my property. I fully acknowledge the risks and hazards involved in this ACTIVITY and agree to assume all risk of loss, injury, death or properly damage that may occur as a result of my participation in the ACTIVITY. I have the physical capacity reasonably necessary to engage in ACTIVITY; however, in case of an emergency, accident or illness, I give permission to be treated by medical professionals if necessary and agree to be responsible for any expenses incurred as a result thereof. I release OSU from any and all claims against OSU for any loss, injury, death or properly damage that may result from my participation in this ACTIVITY.

I agree to comply with all of the rules and conditions of participating in the ACTIVITY, including OSU Rules and Regulations and applicable laws or rules where the ACTIVITY is occurring. **It also is my express intent that this Acknowledgement and Release shall bind** my spouse, family members, heirs, guardians, legal representatives, and assigns. **I further agree to save, hold harmless and indemnity OSU from any claim by myself and aforementioned parties arising out of my participation in the ACTIVITY.**

I recognize and acknowledge that OSU may record my participation and appearance in ACTIVITY on any recorded medium (including, but not limited to video, audio, photos) for use in any form (including, but not limited to print, websites blogs, internet). I authorize such recording and release OSU to use my name, likeness, voice, and biographical material to exhibit or distribute such recordings in whole or part without restrictions or limitations for any educational or promotional purpose. I further release OSU to use material from blogs associated with ACTIVITY without restrictions or limitations for any educational or promotional purpose. I further release DSU to use material from blogs associated with ACTIVITY without restrictions or limitations for any educational or promotional purpose. I further understand and agree that this Release is intended to be as broad and inclusive as permitted by law. If any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and legal effect.

By signing below, I hereby a acknowledge that I am at least 18 years old, that I have read this document in its entirety, understand it, and sign it voluntarily.

Signature of Participant/Registrant: _		Date:	
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Make a copy of this form for your records.