



EL CAMINO COMMUNITY COLLEGE DISTRICT

Fitness Center Release Form

Please Print Clearly:

Name: _____

USE OF EL CAMINO COLLEGE FITNESS CENTER

I understand and acknowledge that the activities associated with the El Camino College Fitness Center, by their very nature, pose the potential risk of serious injury/illness to individuals who participate. I understand and acknowledge that some of the injuries/illness to individuals who participate. I understand and acknowledge that some of the injuries/illnesses which may result from participating in these activities include, but are not limited to the following:

1. Sprains/strains
2. Fractured bones
3. Unconsciousness
4. Head and/or back injuries
5. Paralysis
6. Loss of eyesight
7. Communicable diseases/blood borne pathogens
8. Death

Knowing that there may be dangers, hazards, and risks associated with such an Activity, and in consideration of being permitted to participate in the Activity, on behalf of myself, my family, my heirs, and personal representative(s) (hereinafter referred to as "Releasors"), I, the undersigned, agree to assume all the risks and responsibilities surrounding my participation in the Activity, the transportation, and in any independent research or activities undertaken as an adjunct thereto. My participation in these activities is purely voluntary and I elect to participate in spite of and with full knowledge of the inherent risks.

As an employee of El Camino Community College District, I fully understand that participation in the Activity is recreational and is outside the course and scope of employment.

In consideration of being allowed to participate and for services and/or equipment provided. Releasors hereby release the El Camino College District, and their principals, directors, officers, agents, employees and volunteers (hereinafter referred to as "Releasees") from all liability and waive, forever discharge, and covenant not to sue the Releasees from and against any and all liability for any harm, injury, damage, claims, demands, actions, causes of action, costs, and expenses of any nature that Releasors may have or that may hereafter accrue to Releasors, arising out of or related to any loss, damage, or injury, including but not limited to suffering and death, that may be sustained by Releasors or by any property belonging to Releasors, whether caused by the negligence or carelessness or Releasees, or otherwise, while in, on upon, or in transit to or from the premises where the Activity, or any adjunct to the Activity, occurs or is being conducted.

I have no physical or medical condition, which to my knowledge, would endanger others or myself if I participate in any Activity, or would interfere with my ability to participate in any Activity.

Participant's Signature: _____ **Date:** _____