ACKNOWLEDGEMENT OF RISK AND WAIVER OF LIABILITY

Read this Acknowledgement of Risk and Waiver of Liability carefully and in its entirety. It is a binding legal document. Sign and return this form to the above OSU Department or supervising employee. If you are under the age of 18, this form MUST be signed by you as the participant AND by your parent or legal guardian.

Activity: OSU Cycling Club – Road Race

I, the undersigned, acknowledge that I have read the following and voluntarily agree to its terms and conditions to participate in the event/activity listed on the front side of this sheet (hereafter referred to as ACTIVITY)

I have full knowledge of the facts and circumstances surrounding the ACTIVITY described above and am voluntarily participating in this ACTIVITY, which may include actions and events that are risky and dangerous, including from which bodily injury, up to and including mortal injury, may occur. 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 understand the Oregon Tort Claims Act (ORS 30.260 to 30.300) permits the State of Oregon, acting by and through the State Board of Higher Education, on behalf of Oregon State University, its officers, employees, and agents (hereafter referred to as UNIVERSITY) to accept responsibility only for the negligent acts of UNIVERSITY. UNIVERSITY is prohibited from accepting any liability for the acts, omissions and conduct of person participating in activities. I will indemnify and hold UNIVERSITY harmless with respect to any and all claims, injuries, and costs associated with participation in this ACTIVITY. I recognize and acknowledge that I am not an agent or employee of the UNIVERSITY, that I may not and will not represent myself as such, and that I cannot and will not bind or obligate the UNIVERSITY in any way.

I will assume all responsibility and risks associated with my participation, including all risk of property damage and injury to others and to myself, regardless if occurring before, during or after the period of the ACTIVITY. I agree to comply with all of the rules and conditions of participating in the ACTIVITY, including UNIVERSITY Rules and Regulations and applicable laws or rules where the ACTIVITY is occurring.

I recognize and acknowledge that UNIVERSITY 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 UNIVERSITY 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 UNIVERSITY to use material from blogs associated with ACTIVITY without restrictions or limitations for any educational or promotional purpose.

I am aware that if I provide a vehicle not owned and operated by UNIVERSITY for transportation to, at, or from the ACTIVITY, or if I am a passenger in such vehicle, UNIVERSITY is not responsible for any damage caused by or arising from such transportation. I understand that I will be expected to accept full responsibility and liability for myself and my passengers and that I have automobile liability insurance in accordance with Oregon Insurance Requirements or the state in which my vehicle is licensed.

By signing below, I hereby acknowledge that I have read this document in its entirety, understand it, and sign it voluntarily, that I am of legal age and that I agree to the terms and conditions listed above.

Print Name	Signature	Date	Under 18?	Parent/Guardian Signature (if under 18)

Team Name: _____