Print Form

Group Name: _____

Please Print

GROUP WAIVER

Acknowledgement of Understanding: I acknowledge that I have read the attached ***Waiver of Liability, Assumption of Risk, and Indemnity Agreement*** and fully understand its terms. I affirm that I am voluntarily participating in the _____ and further acknowledge that I know, understand and appreciate the inherent risks of the _____. I assume full responsibility for any and all injuries or damages which may occur to me as a result of the inherent risks associated with _____.

Student ID#	Print Name	Sign	Date
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