

Release of Claims

I, _____, am a member of the _____ 4-H Club, and would like the opportunity to participate in the _____ activity from _____, to _____, 20___. I understand that I am not required to participate in this activity but I want to do so, despite the possible risks and despite this Agreement. I also recognize that by participating in this activity, as with participation in any sports or physical activity, I risk sustaining personal injury.

In consideration of being granted the opportunity to participate in this activity, I, for myself, my executors, administrators, and assigns, do hereby release and forever discharge The Ohio State University and its Board of Trustees, its administrators, faculty members, employees, agents, students, and the Crawford County Agricultural Society who arranged, advised or supervised the travel, scheduling or any other function of this activity from all claims of damages, demands, and any actions whatsoever, including those based on negligence, in any manner arising out of my participation in this activity.

I hereby attest and verify that I have full knowledge of the risks involved in this activity, that I assume any expenses I may incur in the event of an accident, illness or other incapacity, regardless of whether I have authorized such expenses.

As a participant of this activity, I also hereby agree that I must comply with University rules and regulations.

I represent and certify that my true age is either 18 years old or, if I am under 18 years old on this date, my parent or legal guardian has signed the Agreement to Release and indemnify the University for participants under the age of 18 years.

I have read this entire Release, I fully understand it, and I agree to be legally bound by it.

Date _____

Participant's Name (Print) _____

Participant's Signature _____

In case of emergency, contact: (Name) _____

Phone Number _____ or _____

(This form to be used if participant is 18 years of age or older)

