



CASE

CASE WESTERN RESERVE UNIVERSITY

Student Activities Office

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Waiver and Release

I, _____ have asked to participate in
the following activity: _____

Which will take place _____.

My participation will include travel to _____.
I have been informed of hazards that may be encountered during this trip and
I understand that there is a risk of death, personal injury, and damage to
property.

As a condition of participating in such activity, I agree to the following:

1. In consideration of being granted the opportunity to participate in this activity and use services and facilities furnished or made available by Case Western Reserve University as well as the assistance and advice of employees of the University, I do hereby waive and release Case Western Reserve University, its officers, trustees, employees, and agents from all claims, costs, liabilities, expenses and judgments, including attorney's fees and court costs, which may arise out of or be in any way connected with my participation in this activity.
2. I am physically capable of participating in this activity. I understand that I am responsible for any travel, medical, or other personal insurance which I may deem necessary. I also understand that Case Western Reserve University is not responsible for my safety under any circumstances.

Signature _____ Date: _____