

Marion Military Institute Activity

General Release, Indemnity and Waiver of Liability

In consideration of Marion Military Institute (MMI) allowing me to participate in the event/activity described below, the undersigned, for himself/herself and his/her personal representatives, assigns, heirs and next of kin, or any of them:

1. Hereby releases, waives, discharges, and indemnifies Marion Military Institute, the Alabama Community College System and the Board of Trustees of the Alabama Community College System and their respective members, officers, employees, volunteers and agents (hereafter, "Releasees") from and against all liability to the Undersigned, his/her personal representatives, assigns, heirs and next of kin for all losses or damage of any kind or nature and any claim or demand therefore on account of injury to the person or injury resulting in the death of the Undersigned or property damage, whether caused by the negligence of Releasees or otherwise, while the Undersigned is being transported to and from or while participating in the below described event/activity.
2. Hereby covenants not to sue and agrees to Save and Hold Harmless the Releasees and each of them from any and all losses, liabilities, damages, costs, actions, claims or demands of any kind and nature whatsoever which may arise out of or relate to, directly or indirectly, the Undersigned's participation in the event/activity or while being transported to or from the event/activity, including but not limited to, embarking and disembarking any vehicle, bus, airplane or other mode of transportation whether caused by the Releasees or otherwise.

Event/ Activity: All activities relating to the American Tae Kwon Do Foundation Camp

Date: 16-19 June 2022

Location: Marion Military Institute

Emergency Contact: _____ Phone: _____

Medications you are currently taking and Medication Allergies (optional): _____

The Undersigned is fully aware of the risks and hazards associated with this event/activity and hereby voluntarily elects to participate in said event/activity with the knowledge of the danger involved. The Undersigned hereby voluntarily assumes all risk of loss, damage, injury, or death that may be sustained by the Undersigned while participating in the event/activity and while being transported to and from the event/activity.

Should the Undersigned be injured while engaging in the above described event/activity or while traveling to and from the same and the Undersigned is not capable of communicating with medical providers, the Undersigned hereby grants permission to any medical provider to render

any necessary treatment to them. The Undersigned hereby agrees to be responsible for the payment for all expenses related to such medical treatment.

The Undersigned expressly agrees that the foregoing, General Release, Indemnity and Waiver of Liability Agreement is intended to be as broad and inclusive as is permitted by the law of the State of Alabama and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTANDS ITS CONTENTS. THE UNDERSIGNED IS AWARE THAT THIS IS A RELEASE OF LIABILITY AGAINST THE RELEASEES AND SIGNS IT OF HIS/HER OWN FREE WILL.

Date: _____

Signature of Participant or Parent or Legal Guardian if
Participant is a minor.

Printed Name of Participant/Parent/Legal Guardian

Date: _____

Signature of Witness

Printed Name of Witness