1. In consideration of the voluntary participation, in any way, of the ASI Recreation’s property, facilities, services, programs, activities, and events (collectively “Activity”). I release from liability and waive my right to sue The Associated Students, CSULB, The State of California, Trustees of the California State University, California State University, Long Beach, and the employees, officers, volunteers, and agents (collectively “Associated Students and University”), from any and all claims, including, but not limited to, claims arising from the University’s actions or omissions or damages resulting in any physical or mental injury, illness, death or economic loss I may suffer or which may result from my voluntary participation in the Activity.

2. I am voluntarily participating in this Activity. I understand that there are risks associated with this type of Activity such as physical and/or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability or even death, which may occur from my participation in this Activity. These injuries or outcomes may arise from my own or other’s actions, inactions, negligence, or from the conditions of the Activity location(s) or facility(ies). Nonetheless, I assume all related risks, whether known or unknown to me, of my participation in this Activity, including travel to and from the Activity.

3. I agree to hold the Associated Students and University harmless from any and all claims, loss or damage to my personal property, liabilities and costs, including attorney’s fees, as a result of my participation in this Activity, including travel to and from the Activity. If the Associated Students and University incur any of these types of expenses, I agree to reimburse the Associated Students and University.

4. If I need medical treatment, the Associated Students and University are authorized to obtain medical treatment for me. I will be financially responsible for any costs of such treatment. I agree that I will not hold the Associated Students and University responsible for any claims resulting from any medical treatment. I am aware that neither the Associated Students and University provides health insurance for me and I should carry my own health insurance.

I have read, understand, and agree to items 1-4. Please Initial:

5. I agree and understand that I am a currently enrolled CSULB student paying USU fees, non-enrolled “continuing” student, associate member, or affiliated member (collectively “Member”) as defined by USU policies. If at any time I am an enrolled student paying USU fees and I am no longer enrolled, my participation in the Activity will be automatically terminated.

6. The Member, dependent children of the Member, and all guests of the member agree(s) to comply with all current USU Policies, Procedures, all posted rules and or instruction from the Activity’s staff. Member also acknowledges the Policies and Procedures may be revised, supplemented or amended at the discretion of the University Student Union.

7. The Associated Students, CSULB or the California State University-Long Beach reserves the right to suspend or terminate use privileges upon written notice.

8. I grant permission to the Associated Students and University to take and use visual/audio of me. Visual/audio images are any type of recording, including but not limited to photographs, digital images, drawings, renderings, voices, sounds, video recordings, audio clips or accompanying written descriptions. Associated Students and University will not materially alter original images. I agree that Associated Students and University owns the images and all rights related to them. The images may be used in any manner or media without notifying me, such as Associated Students and University sponsored websites, publications, promotions, broadcasts, advertisements, posters and theater slides, as well as non Associated Students and University uses. I waive any right to inspect or approve the finished images or any printed or electronic matter that may be used with the, or be compensated for them. I release Associated Students and University, including any firm authorized to publish and/or distribute a finished product containing the images, from any claims, damages, or liability which I may ever have in connection with the taking of use of the images or printed material used with the images.

9. I am 18 years or older. I have read this document, and I am signing it freely. I understand the legal consequences of signing this document, including (a) releasing the Associated Students and University from all liability, (b) waiver of my right to sue the Associated Students and University, (c) and assumption of all risks of participating in this Activity, including travel to and from the Activity. I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms.

I have read, understand, and agree to items 5-9. Please Initial:

Name (please print): ___________________________ CSULB ID#: ___________________________

Signature: ___________________________ Date: ___________________________

I am the parent or legal guardian of the Participant under the age of 18. I have read this document, and I am signing it freely. I understand the legal consequences of signing this document, including (a) release of Associated Students and University from all liability on my and the Participant’s behalf, (b) waiver of my and the Participant’s right to sue, (c) and assumption of all risks of the Participant’s participation in this Activity, including travel to and from the Activity, I allow Participant to participate in this Activity. I understand that I am responsible for the obligations and acts of Participant as described in this document. I agree to be bound by the terms of this document.

Name of Parent/Legal Guardian (please print): ___________________________ Date: ___________________________

Signature: ___________________________