

Assumption of Risk

Every individual who intends to participate in a Queen's University Instructional Sports Skills Program will be required to complete the following Assumption of Risk Form:

I, the undersigned, am of full age and wish to participate in _____ (name of program) in Queen's University Instructional Sports Skills Program. I acknowledge that this program involves light to vigorous exercise that I am responsible to ascertain whether I am physically fit or otherwise to participate in this program, and that consultation with my family physician, prior to participation, is recommended by Queen's University. In consideration of Queen's University permitting me to participate in this program, I hereby agree to assume all risks involved in this program and do hereby waive and release any and all rights against Queen's University, its employees and agents, as a result of my participation in this program.

Date

Participants Name

Participant's Signature