Assumption of Risk and Release from Liability
Drexel University
Greek Week Activities
Greek Week 2011

This Assumption of Risk and Release from Liability pertains to the Greek Week activities offered by Drexel University ("University") on April 25, 2011 to May 7, 2011 ("Activity").

By signing below, I acknowledge that I wish to participate in the Activity. In consideration of the opportunity to participate, I hereby state:

1. I understand that the Activity may include, but is not limited to, the following: a Chariot Race, Dodgeball, Arm-Wrestling Contest, Water Relays/Swimming, Tug of War, Rock Climbing, Talent Show, Flag Football, Powderpuff, Tug of War, Volleyball, Nick Pipino 5K Run, and Food Eating Contests. I acknowledge that I am responsible for making sure that my health is adequate to participate in the strenuous, vigorous physical activity involved in the Activity. I confirm that I am physically fit and adequately skilled to participate in the Activity.

2. I understand that certain risks are inherent in the Activity and I fully accept those risks. I understand that participation in the Activity exposes me to risk of injuries, including but not limited to temporary or permanent muscle soreness, tendonitis, sprains, strains, cuts, abrasions, bruises, ligament and/or cartilage damage, head, neck or spinal injuries, loss of arms or legs, eye damage, gastrointestinal issues and disorders, disfigurement or even death. I also understand that there may be other risks that are neither now known nor reasonably foreseeable.

3. I understand that the owners, employees, officers, agents or clients of any third-party providers of goods or services used for Activity, and any other third parties are not the agents or employees of University, and that the University is not responsible for any injuries that may be caused by the negligent or intentional acts or omissions of any third parties.

4. I acknowledge and agree that, in the absence of my agreement and execution of this Assumption of Risk and Release from Liability, I would not be permitted to participate in the Activity; that I understand the risks and scope of activities involved in the Activity; and that I agree to assume the risks of my participation in the Activity, including the risk of catastrophic injury or death. I understand that my participation in the Activity is entirely voluntary and at my own risk.

5. I understand and acknowledge that University does not provide insurance to cover medical expenses for injuries that may be sustained by me or for damage to my personal property and that University strongly recommends that I carry my own health, medical and property insurance for purposes of potential losses related to this Activity. By signing below, I am also consenting to first-aid emergency medical care and, if necessary, admission to an accredited hospital or emergency care center if necessary for the provision of such care, or for treatment of injuries that I may sustain while participating in the Activity.

6. I release and fully discharge Drexel University, its trustees, officers, employees, and agents, from all liability in connection with my participation in the Activity, for or on account of any personal illness or injury, including death, that I may sustain, or for or on account of any loss or damage to any of my personal property or effects.

7. I fully understand that all University policies and regulations, including those embodied in the Student Code of Conduct are in effect and apply to my behavior for the entire duration of the Activity, and that any violation of these policies or regulations may result in sanctions.

Participant Name (Print)	**Participant Signature**	**Phone**	**Date**