

ASSUMPTION OF RISK AND RELEASE STATEMENT

This is a legally binding document

I hereby release, waive, discharge and hold harmless Logan University and College of Health Sciences, its trustees, officers, servants, agents, and employees (hereinafter referred to as Releasees) from any and all liability, claims, demands, actions and/or causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by Participant or to any property belonging to myself or Participant, whether caused by the negligence of the Releasees, or otherwise, while participating in A.C.E.S. Summer Workshop and related program activities, or while in, on, upon, or on route to or from the location(s) where such activities are being conducted.

1. I am fully aware of risks and hazards connected with the activity of A.C.E.S. Summer Workshop, Including, but not limited to risks and dangers of:

Lab dissections, exposure to cadavers, travelling off-site to view Clinical observation and other various activities.

which I understand could lead to, among other things, loss or damage to property and/or loss, damage, injury or death to Participant. I hereby elect to voluntarily give my permission for Participant to take part in said activity knowing that the activity may be hazardous to Participant. I voluntarily assume full responsibility for any risks of loss, property damage or personal injury, including death, that may be sustained by Participation, or any loss or damage to property owned by me or in my control, as a result of Participant being engaged in such activity, whether caused by the negligence of Releasees or otherwise.

2. I further agree to indemnify and hold harmless the Releasees from any direct or indirect loss, liability, damage or costs, including court costs and attorneys' fees that they may incur due to Participant taking part in said activity.
3. It is my express intent that this Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representatives, if I am deceased, and shall be deemed as a release, waiver, discharge, and covenant not to sue the above-named Releasees. I hereby further agree that this Agreement shall be construed in accordance with the laws of the State of Missouri.
4. Public Relations are an important part of the Logan University Programs. Photographs and video segments are used in various prints and electronic media to recognize members for their work and to let others know what is happening at Logan University and College of Health Sciences. Because a large number of youths are involved in the University's programs, we cannot assure you that your child will not be photographed. We will ask the photographers to honor individual requests not to be photographed. Please visit with your children about your wishes and encourage them to let photographers know that they request not to be photographed.

I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Agreement, understand all its provisions, and sign it voluntarily as my own free act and deed. I warrant that no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made.