



University of Iowa Recreational Services
Iowa Indoor Rowing Challenge
Liability Waiver and Assumption of Risks



I, _____(print legibly) in consideration for being permitted to participate in the University of Iowa Department of Recreational Services Rowing Program Iowa Indoor Rowing Challenge on February 1, 2014, and to use the University's equipment and facilities, on behalf of myself, my family, my heirs, and my assigns, I hereby release, waive and forever discharge the University of Iowa; the State of Iowa; and the Board of Regents, State of Iowa, and each of their respective, employees, agents, representatives and volunteers (Releasees), from any and all liability for bodily injury, including death, and, property loss or damage that may result from, arise out of, or be in any way related to my participation in the Program, my use of the facilities or equipment, or engaging in any activities incidental thereto, wherever, whenever, or however the same may occur., I agree to indemnify and hold harmless the Releasees from such liability whether injury, loss or damage is caused by my fault or negligence, the fault or negligence of the Releasees or the fault or negligence of any third party.

I, _____also affirm that I am voluntarily participating in the University of Iowa, Department of Recreational Services, Intramural Sports Iowa Indoor Rowing Challenge competition, and further acknowledge that I know, understand, and appreciate the inherent risks of Rowing which may include but are not limited to strains, sprains, back, shoulder, neck, knee, rib, wrist or other joint injuries, breathing abnormalities, heart attack, death or paralysis. I also understand and accept that there could be unknown or unanticipated risks in this activity. Understanding that this is a strenuous activity, I certify that that I have no known physical limitations, pre-existing injuries, or medical problems that might limit my ability or worsen by my participation in this program. I assume full responsibility for any and all injuries or damages that may occur as a result of participation in the University of Iowa, Department of Recreational Services Rowing Program Iowa Indoor Rowing Challenge and/or this competition.

By signing below, I indicate my understanding and voluntary agreement with all the statements above.

Signature: _____ (your signature) _____ (Date)

Address: _____ (street) _____ (city/state) _____ (zip)

Phone: _____(C) _____(H) _____(W)

Email: _____ Date of birth: ____/____/____

NOTE: IF YOU ARE LESS THAN EIGHTEEN YEARS OLD, YOUR PARENT OR LEGAL GUARDIAN MUST ALSO SIGN (form on back)

**If the participant is a minor (in Iowa, under age 18),
this release must be signed by the participant's parent or legal guardian.**

I, _____, as parent (or legal guardian) of _____, the person executing the foregoing release, do hereby give my permission for said person to participate in said Hawkeye Community Rowing Program **ERGATTA**, and consent to all terms and conditions of said release.

Signature: _____ **Date:** ____/____/____

Address: _____

Phone: _____

Photo Release Statement

I, _____, grant the University of Iowa, Recreational Services, and persons acting for or through them the right to use, reproduce, assign, and/or distribute photographs, films, videotapes, and sound recordings of myself, for use in materials they may create.

Signature: _____ **Date:** ____/____/____

May use my photo

May not use my photo

Emergency Contact(s)

Name(s): _____

Phone: (1) _____ (2) _____ (3) _____