

Activity: Smorgasport 2019, activities include: mocktails; henna; caricature; balloon creations; photo booths; silent disco; wax hands; walk around magician; tie-dye; carnival games (Bowling Alley, Duck Races, Milk can Toss, Mini basketball, Skee-ball, The can can, Flip a chick, Crazy ball, Football toss, Golf putting, Ping Pong Game, Shuffle board, Wackey Slap, Dip bowling, Crazy driver, Las Vegas aces, Tip the cat, Plinko, Ring toss, Wheel of fortune.); inflatable activities (Foam Inflatable Axe Throwing, Laser Tag, Zorb Run, Rugged Obstacle Course, Wrecking Ball, Jousting); carnival rides (round up, hurricane); food trucks; slackline; hammocks; and all other activities hosted by ASI.

Activity Date(s) and Time(s): August 23, 2019, 7:00pm to 11:00 pm **Activity Location(s):** University Student Union and CSULB property.

In consideration for being allowed to participate in this Activity, including air and/or ground transportation, on behalf of myself and my next of kin, heirs and representatives, I **release from all liability and promise not to sue** the State of California, the Trustees of The California State University, California State University, Long Beach, CSULB Associated Students, and their employees, officers, directors, volunteers and agents (collectively "University") from any and all claims, **including claims of the University's negligence**, resulting in any physical or psychological injury (including paralysis and death), illness, damages, or economic or emotional loss I may suffer because of my participation in this Activity, including travel to, from and during the Activity.

I am voluntarily participating in this Activity. I am aware of the risks associated with traveling to/from and participating in this Activity, which include but are not limited to physical or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, and/or death. I understand that these injuries or outcomes may arise from my own or other's actions, inaction, or negligence; conditions related to travel; or the condition of the Activity location(s). **Nonetheless, I assume all related risks, both known or unknown to me, of my participation in this Activity, including travel to, from and during the Activity.**

I agree to **hold** the University **harmless** from any and all claims, including attorney's fees or damage to my personal property that may occur as a result of my participation in this Activity, including travel to, from and during the Activity. If the University incurs any of these types of expenses, I agree to reimburse the University. If I need medical treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I am 18 years or older. I understand the legal consequences of signing this document, including (a) releasing the University from all liability, (b) promising not to sue the University, (c) and assuming all risks of participating in this Activity, including travel to, from and during 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 this document, and I am signing it freely. **No other representations concerning the legal effect of this document have been made to me.**

Participant's Signature

Date

Participant's Name (print)

If Participant is under 18 years of age

I am the parent or legal guardian of the Participant. I understand the legal consequences of signing this document, including (a) releasing the University from all liability on my and the Participant's behalf, (b) promising not to sue on my and the Participant's behalf, (c) and assuming all risks of the Participant's participation in this Activity, including travel to, from and during 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. I have read this document, and I am signing it freely. **No other representations concerning the legal effect of this document have been made to me.**

Signature of Minor Participant's Parent/Guardian

Minor Participant's Name

Name of Minor Participant's Parent/Guardian (print)

Date