

**RELEASE FROM RESPONSIBILITY, ASSUMPTION OF RISK,
AND WAIVER FOR VISITORS PARTICIPATING IN ACTIVITIES**

PARTICIPANT'S FULL NAME: _____

DATE OF BIRTH (MO/DAY/YR): _____

ADDRESS: _____

LOCATION AND SPONSOR OF ACTIVITY: The Ohio State University (Department of Design), Columbus, Ohio

DATE(S) OF ACTIVITY: _____

DRIVER: _____

I understand that:

- (1) I will be traveling in a motor vehicle driven by an adult to and from _____
_____ and that I am to wear my safety-belt while traveling;
- (2) I am expected to respect each other, the vehicles I ride in, and the people I travel with during the trip;
- (3) Riding in a motor vehicle may result in personal injuries or death from wrecks, collisions or acts by riders, other drivers, or objects; and
- (4) I am to remain in my seat and not be disruptive to the driver of the vehicle.

I, the above named participant, am eighteen years of age or older and have voluntarily applied to participate in the above described activity. I acknowledge that the nature of the activity may expose me to hazards or risks that may result in my illness or personal injury, and I understand and appreciate the nature of such hazards and risks.

In consideration of my voluntary participation in this activity and as a condition for the transportation I receive, I hereby accept all risk to my health and of any injury that may result from such participation and I hereby release The Ohio State University, its governing board, officers, employees and representatives from any liability to me, my personal representatives, estate, heirs, next of kin, and assigns for any and all claims and causes of action for loss of or damage to my property and for any and all illness or injury to my person that may result from or occur during my participation in the activity, whether caused by negligence of The Ohio State University, its governing board, officers, employees, or representatives, or otherwise. I further agree to hold harmless The Ohio State University and its governing board, officers, employees, and representatives from liability for the injury of any person(s) and damage to property that may result from my negligent or intentional act or omission while participating in the above described activity.

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR MY INJURY OR DAMAGE TO MY PROPERTY THAT OCCURS WHILE PARTICIPATING IN THE DESCRIBED ACTIVITY AND IT OBLIGATES ME TO HOLD HARMLESS THE OHIO STATE UNIVERSITY FOR ANY LIABILITY FOR INJURY OF ANY PERSON AND DAMAGE TO PROPERTY CAUSED BY MY NEGLIGENT OR INTENTIONAL ACT OR OMISSION.

Signature: _____ Date: _____

Print Name: _____