This waiver, release, covenant not to sue, indemnity, and assumption of risk agreement (“Agreement”) is executed in favor of InterVarsity Christian Fellowship/USA, its current and former directors, officers, employees, volunteers, insurers, affiliates and agents (collectively “InterVarsity”).

In consideration for being accepted and allowed to participate in this conference/project/volunteer role/event and any and all activities associated with its program and location (collectively, the “Event”), I freely and voluntarily agree as follows:

1. **General Release:** I unconditionally and fully release, hold harmless, defend, indemnify, and discharge (collectively, “Release”) InterVarsity from and against any and all direct and indirect losses, expenses, liabilities, claims, suits, proceedings, demands, judgments, assessments, actions, costs, fees, and damages of whatever kind or nature, either in law or in equity, arising from or related to my involvement in or presence at the Event, including loss, illness, injury or damage to myself or my property (collectively “Claims”), regardless of whether such Claims are caused in whole or in part by the active or passive negligence of InterVarsity or otherwise and regardless of whether such Claims have accrued or are hereafter acquired. Additionally, I covenant not to commence a lawsuit or administrative complaint or any sort of proceeding whatsoever against InterVarsity at any time in the future based on any right or claim that I may have or hereafter acquire with respect to Claims. Additionally, I may be given the opportunity to participate in riskier activities including, without limitation, formal and informal sports (including by way of example, activities ranging from capture- the-flag to touch football to Frisbee golf to dodge ball to roughhousing, and every other remotely related physical game or activity), paintball, gymnastics, ice or inline skating, laser tag, hiking, biking, skateboarding, equestrian activities, water activities including use of watercraft, adventure activities, ropes courses, zip lines, rock-climbing walls, downhill skiing, snowboarding, sand boarding, construction, parasailing, cave diving, sky diving (or other similar free-fall or air activities), spelunking, use of firearms or archery, and use of motorized off-road vehicles (including go-karts, ATVs, Segways and snowmobiles) (collectively, “Riskier Activities”). I will be under no obligation to participate in such Riskier Activities.
2. **Safety and Acceptance of Risks; Behavioral Expectations**: I personally assume responsibility for my actions. I agree that I am responsible for following all rules communicated to me during the Event and will use safety equipment as applicable. I agree that my participation is a privilege, not a right, and InterVarsity reserves the right to dismiss me from the Event at my expense with no refund, and/or to refuse to allow my participation in future events/activities. I acknowledge that I have a responsibility to act within the limits of my ability, to heed all warnings and instructions regarding participation in the Event, to maintain control of my person, equipment or devices, and to refrain from acting in any manner that may cause or contribute to death or injury to myself or others or damage to property. I understand that non-medical use of alcohol and other drugs is prohibited on InterVarsity premises and at InterVarsity activities. *To the maximum extent possible*, I understand, assume, and accept the risks and hazards, either known to me or readily foreseeable, involved in participation in the Event, including risks inherent to any Riskier Activities in which I choose to participate as well as, if applicable, risks inherent to camping in the wilderness such as uneven terrain, proximity to wildlife, or other known or unknown hazards. I will alert an Event supervisor if I become aware of any condition that would be unsafe or hazardous and will cease participation.
3. **Photograph Release**: I grant InterVarsity permission to take photographic images and video and/or sound recordings of me, and grant InterVarsity all right, title, and interest in such photographic images and video and/or sound recordings made by InterVarsity relating to the Event, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs and video and/or sound recordings, and authorize this material to be used for publicity.
4. **Medical Release**: I understand and agree that InterVarsity does not assume any responsibility for or obligation to provide medical, health, or disability insurance, and I waive any claim to such coverage against InterVarsity. I give permission to InterVarsity to obtain medical assistance in the event of an emergency. This permission will include transportation, the administration of medicines, surgical treatment, X-ray examination or hospitalization as might be ordered by a licensed medical doctor. I release and discharge InterVarsity from any and all liability for any first aid rendered, treatment performed, or transportation provided or arranged pursuant to this Agreement. Further, I agree that, if I am an adult in my state (see page 2) and am mentally competent to do so at the time, I will make decisions regarding my health care based on the best information available to me and will not hold InterVarsity responsible for my decisions. If I am not mentally competent to make these decisions, I authorize InterVarsity to make these decisions on my behalf, and I release InterVarsity from any liability arising from or related to medical decisions made in good faith on my behalf. I understand that it is my responsibility to evaluate my physical and mental health and determine whether I am sufficiently healthy to participate in the Event.
5. **Alternative Dispute Resolution**: Any claim or dispute arising from or related to this Agreement shall be settled by mediation and, if necessary, legally binding arbitration in accordance with the rules of a mutually agreed upon alternative dispute resolution service and such proceeding shall take place in Madison, Wisconsin. Judgment upon an arbitration decision may be entered in any court otherwise having jurisdiction. I agree that these methods shall be the sole remedy for any controversy or claim arising out of this Agreement and expressly waive my right to file a lawsuit in any civil court against InterVarsity for such disputes, except to enforce an arbitration decision.
6. **Governing Law; Scope**: I agree that this Agreement is intended to be as inclusive as the laws of Wisconsin permit. This Agreement shall be governed by the laws of the State of Wisconsin and the United States without reference to conflict of laws. The releases set forth herein are intended to include all claims made by my family, estate, heirs, personal representatives and/or assigns. I agree that if a clause or provision of this Agreement is found by a court or arbitrator to be invalid, that finding shall not invalidate any other clause or provision of this Agreement, which shall continue to be enforceable.
7. **REQUIRED MEDICAL INFORMATION** (*California Only*)
	1. Please describe any health conditions requiring medication, treatment, special restrictions or consideration. List current medications:
		1. Do any medications require refrigeration? \_\_\_No \_\_\_Yes
	2. Food restrictions and allergies that staff should be aware of to avoid problems:
	3. Date of last tetanus shot: Please list known immunizations:

**Minors** may only participate in activities with InterVarsity with consent from their parent or guardian. Required for persons under the age of 18 (19 in Alabama [18 if married], 21 in Mississippi):

I, the undersigned parent or legal guardian of the individual(s) below, consent to the named person’s participation in this activity and agree to the terms of this Agreement. This Agreement is binding upon me as to the participant and his/her estate, heirs, personal representatives and assigns. I also promise to defend, indemnify, and hold harmless InterVarsity from any claim asserted by the participant against InterVarsity if the participant should repudiate this Agreement before or after obtaining adulthood. I take full responsibility for the participant and his/her knowledge of all forms, requirements, and safety issues.

Name(s) of minor(s) attending from same family: Age:

Name(s) of minor(s) attending from same family: Age:

Parent/Guardian Signature

Parent/Guardian Name (printed)\_

Date Signed

**To participate with InterVarsity, you must sign below, indicating your agreement with the Agreement. Please provide the signed copy of the Agreement, including supplemental questions if applicable, with your registration or application.**

# Name (print) Spouse (if attending)

Signature Spouse Signature

Date Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address

Phone E-mail

**Emergency Contact** not attending the event (Print Name): \_ Phone

If I am a volunteer, I understand that this Agreement will be in effect for any and all tasks and activities I undertake as a volunteer for InterVarsity Christian Fellowship/USA for the next year, unless earlier revised or revoked in writing. Such revision or revocation on my part shall not be in force until communicated in writing to InterVarsity’s Legal Counsel.

**FOR THOSE (including students) WORKING WITH MINORS OR VULNERABLE PERSONS:**

x Please initial here if you will be working with minors and/or vulnerable adults to indicate you reviewed, completed, and are submitting answers to the supplemental questions at the end of this form. If you are unsure of whether this applies to you, please contact your supervisor or event director. By signing below, you agree that, if you become involved in criminal proceedings or other circumstances that would cause your answers to any of the supplemental questions to ch**a**nge, you will immediately provide a complete description of the circumstances to the Legal Department of InterVarsity. Note that your supervisor or event director will provide instructions on completing a background check online if applicable; this will require additional consent from you.

**Please provide the signed copy of this agreement, including supplemental questions if applicable, with your registration or application.**

**SUPPLEMENTAL QUESTIONS FOR THOSE WORKING WITH MINORS (those 17 and under) OR VULNERABLE PERSONS (adults whose physical, mental, or emotional condition makes them dependent upon others) ONLY:** I agree to furnish the following background information *(Only complete if you will be working with minors and/or vulnerable adults. This includes students volunteering with vulnerable persons as part of an Urban Program, etc.):*

**Yes No**

1. Have you ever been convicted of a criminal offense (felony or misdemeanor, except for minor traffic violations)? You will need to answer “yes” if you have entered into a plea agreement, including a deferred sentence or deferred judgment arrangement, in connection with a criminal charge.

2. Have you ever been charged with a **s**exual offense, crime of violence or offense relating to minors or vulnerable adults?

3. Have you ever been reported to a social services agency, law enforcement authority, child abuse registry or similar organization regarding abuse or misconduct involving minors or vulnerable adults?

4. Have you ever been subjected to expulsion, reprimand or other discipline by a church, denomination or other religious organization, including InterVarsity?

5. Have you ever been dismissed from employment or a volunteer role by any employer or organization, including InterVarsity and/or other charitable and religious organizations, following an allegation of sexual misconduct or other immoral or inappropriate behavior or conduct?

6. Have you ever been the subject of an investigation or allegation of sexual misconduct, sexual harassment, sexual boundary violations, or other immoral behavior or conduct involving adults or children?

If you checked “yes” to any question above, you may be precluded from participating in an event involving minors and/or vulnerable adults. InterVarsity will evaluate what you have written and may ask you to provide additional information. In addition, InterVarsity may determine that it needs to conduct an investigation and may require your assistance with this. This investigation may include a background screening including, but not limited to, the following: National, State, and County Criminal Databases, Social Security Search, National Sex Offenders Registry, Motor Vehicle Records, or discussions with law enforcement or others as necessary and appropriate. InterVarsity reserves the right to determine, at its discretion, what action should be taken. Your completion of these questions indicates your agreement to this provision.

If any of your responses or information provided on this form are untruthful or inaccurate, InterVarsity may determine that you are no longer qualified to be associated with the ministry in any capacity.