

Participant Agreement, Release and Assumption of Risk

1. I acknowledge that my participation in dance/circus arts training and instruction, including aerial arts (fabric and any other apparatus introduced in class), open studio workouts which may or may not have a coach/instructor present, and other disciplines entails known and unanticipated risks that could result in physical and emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.
The risks include, among other things: exposing its participants to the potential for: slips and falls and falling; rope or fabric burns; pinches, scrapes, twists and jolts that could result in scratches, bruises, sprains, lacerations, fractures, concussions, or even severe life threatening hazards; strains, sprains, cuts, bruises, muscle soreness and fractures; musculoskeletal injuries including head, neck, and back; injuries to internal organs; the negligence of other people; my own physical condition; and the risk of emotional and psychological injuries or physical damage associated with this activity.
Furthermore: CSI employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They might misjudge the weather or other environmental conditions. They may give incomplete warnings or instructions, and the equipment being used might malfunction.
2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.
3. Should CSI or anyone acting on our behalf, be required to incur attorneys fees and accosts to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
4. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.
5. I, _____, hereby state below all information that would negatively impact my ability to actively participate in this CSI physical dance activity course and will contact my instructor if any health risks change during the course of the class.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against CSI and its employees on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read this entire document.

I have read and understood it, and I agree to be bound by its terms.

Date: _____

Person Participating in Activity (Print Name): _____

Person Participating in Activity (Signature): _____

Adult or Guardian Signature if participant is under the age of 18: _____

Participant Information:

Address: _____

City/State/Zipcode: _____

Phone: _____ **Date of birth:** _____

CSI Photo Consent Release

I allow the College of Southern Idaho to use my image. This consent also extends to any persons or agencies employed by or partnered with the College of Southern Idaho to use, re-use, publish, or re-publish my image.

I understand that my image may be used in whole, in part, or in a composite with or without my name for illustration, promotion, art, advertising, marketing, trade or any other purpose deemed necessary by the College of Southern Idaho.

I understand that my image may be used in print, online, or in broadcast for an indefinite period of time as deemed necessary by the College of Southern Idaho or its agencies.

I waive any right to inspect or approve the finished product that may be used in conjunction with my image. I release the College of Southern Idaho, its Board of Trustees, its employees, and the State of Idaho from any liability in the use of my image, including any claims of libel or invasion of privacy.

I understand and agree that no financial compensation is offered or expected now or in the future for the use of my image.

Name (Print): _____

Signature: _____ Semester/Year: _____