

WIDENER UNIVERSITY LIABILITY WAIVER / INFORMED CONSENT FORM

I, the undersigned, hereby agree to the following:

1. I am voluntarily using the fitness equipment and/or participating in fitness programs at Widener University School of Law (Widener). I recognize that the use of fitness equipment or participation in fitness programs requires physical exertion and I am fully aware of the risks and hazards involved.

2. I understand that it is my responsibility to consult with a medical professional prior to and regarding my use of Widener's fitness equipment or participation in fitness programs. I represent and warrant that to the best of my knowledge I have no medical condition that would prevent my safe use of Widener's fitness equipment or participation in fitness programs.

3. In consideration of Widener's permitting me to use its fitness equipment or to participate in its fitness programs, I hereby agree to the following conditions:

a. I assume full responsibility for any risks, injuries, or damages, known or unknown, which I might incur as a result of the use of Widener's fitness equipment or participation in its fitness programs.

b. I knowingly, voluntarily, and expressly waive any claim I may have against Widener University School of Law or Widener University and their officers, agents, and employees, for injury or damages sustained as a result of use of Widener's fitness equipment or participation in fitness programs.

c. I agree to use the fitness equipment in the company of at least one other individual so that there are at least two individuals in the fitness equipment room at all times that I am using the equipment.

d. I agree to abide by all other terms and conditions required for the use of the fitness equipment, including attending an orientation session to familiarize myself with the proper operation of the equipment and signing in and out each time that I use the equipment.

I have read the above liability waiver and informed consent form and fully understand its contents. I voluntarily agree to the terms and conditions stated above.

Date

Signature of Participant

Print Name of Participant