



UNIVERSITY of HAWAII®

**KAUA'I**  
COMMUNITY COLLEGE

ASSUMPTION OF RISK AND RELEASE

(Volunteers)

Name of Activity or Program: \_\_\_\_\_

Semester/Year: \_\_\_\_\_

I have read and fully understand the written safety procedures and precautions that are part of the requirements for my participation in the above referenced activity or program, as well as those explained to me by my supervisor(s), and I agree to strictly observe them; and I do for myself, my heirs, executors, and administrators hereby accept full responsibility for and indemnify, release, and discharge the University of Hawaii, its officers, agents, and employees from any and all claims or actions for property damage and/or personal injury which may result from my failure to abide by these safety procedures and precautions, or from any inherent risks in the course/activity.

IN WITNESS WHEREOF, I have caused this release to be executed this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Participant's Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Parent/Guardian's Name (Print)

\_\_\_\_\_  
Cosignature of parent or guardian (required if participant is under 18 years of age)