

MARINE CORPS COMMUNITY SERVICES
INTRAMURAL PROGRAM
INFORMED CONSENT AND WAIVER OF LIABILITY

PLEASE READ AND SIGN

In consideration of my authorization to participate in the Marine Corps Community Services (MCCS) Intramural Program (IP) activities, I here by agree to the conditions set forth in this Informed Consent and Waiver of Liability. I understand that this Informed Consent and Waiver of Liability will expire one year from the date of its execution. I understand that there are various risks involved with my participation in and enjoyment of MCCS IP activities. I understand that risks of use of the MCCS IP activity include, but are not limited to, injuries caused by the following: the negligence of other participants; hot and/or inclement weather; hard surfaces at intramural facilities and on equipment; irregular facilities terrain; and physically challenging games and activity. I certify that I am physically able and have not been advised against strenuous play or recreational activity by a qualified health professional. I agree that, prior to my participation in the MCCS IP, I will inspect the facilities, equipment, and areas to be used for the activity and, if I believe any are unsafe, I will immediately advise MCCS employees. I further agree that I will obey all MCCS IP rules and verbal directives from the MCCS supervising employees.

In consideration of my participation in and enjoyment of the MCCS IP activity, I hereby assume all risks associated with such use and agree to indemnify, waive, release, and forever discharge the U.S. Government, the U.S. Marine Corps, MCAS Yuma, Arizona, MCCS, MCCS employees, and any other individuals or entities connected in any way the MCCS IP from any and all claims for damages, death, personal injury or property damage and litigation costs/attorneys' fees, arising from or contributed to, in whole or in part, by any act, omission, fault or mistake of the above-named persons or entities and their employees or agents, resulting from my participation in MCCS IP activities.

By my signature below, I affirm that I am the person whose name appears on the line above my signature, that I have read the attached document, that I understand its contents, and that I have executed this document on behalf of that named minor child.

Name of Participant _____

Signature: _____ Date: _____