STATEMENT OF PERSONAL RESPONSIBILITY AND ASSUMPTION OF RISK REGARDING ATTENDANCE AT ____________________________________________________________ AT WASHINGTON UNIVERSITY IN ST. LOUIS

I, ______________________________, am not a student at Washington University in St. Louis (“University”), but wish to attend _______________________________________________ (“the Event”) held ____________________________.

1. Risks and Dangers of Attendance. I am aware and fully understand that attendance at and participation in activities during the Event will involve certain inherent conditions, hazards, and risks which may result in loss or damage to personal property or illness or injury (including death). Those conditions, hazards and risks include but are not limited to ground conditions, inclement weather, the actions of others attending the Event, venue facilities, crimes, accidents, or illnesses. I further understand that the University cannot and does not assume responsibility for any of these conditions, hazards or risks or for any related personal injuries or property damage.

2. University is not Insurer. I understand that the University does not require that I or anyone else attend or participate in the Event. I further understand that it is not the task of students, faculty, staff, administrators or others participating in the Event to serve as guardians of my safety and that I am solely responsible for my own safety during my participation in the Event.

3. Compliance with Laws and Behavioral Standards. I understand that the use or possession of any illegal drugs, including but not limited to marijuana, can have very grave consequences, including arrest and imprisonment. I understand that it is unlawful for me to consume alcohol if I am under the age of 21. I know that I am subject to local law and agree to obey all laws and ordinances of the jurisdiction during my participation in the Event. I also understand that I am expected to behave in a manner consistent with the Washington University Judicial Code and all other applicable University policies. Violations of that Code may result in immediate removal from the Event together with forfeiture of fee paid.

4. Assumption of Risks. Knowing the conditions, hazards and risks of my attendance at and/or participation in the Event, and in consideration of being permitted to enter the Event, I on behalf of my family, heirs and personal representatives, agree to assume all the risks and responsibilities surrounding my attendance to the Event, and, in advance release, waive, forever discharge and covenant not to sue the University, its governing board, officers, agents, employees, students and volunteers (collectively, the “Releasees”) from and against any and all liability for any harm, injury, damage, claims, demands, actions, causes for action, costs and expenses of any nature whatsoever, which I may have or which may hereafter accrue arising out of or related to any loss, damage, or injury, including but not limited to suffering and death, that may be sustained by me or by any property belonging to me in connection with attending the Event, even if such loss, damage, injury was caused by the negligence or carelessness of any of the Releasees with regard to the Event. It is my express intent that this release and hold harmless agreement shall be deemed a release, waiver, discharge and covenant not to sue the Releasees. I further agree to save and hold harmless, indemnify, and defend Releasees from any claim by me or my family arising out of my attendance at the Event.

5. Age. I warrant that I am at least eighteen (18) years of age and fully competent to sign this Release; that I understand the terms contained herein have contractual and not a mere recital; that I have read the Release with full knowledge of its significance; and that I have signed this Release as my own free act.

THIS IS A RELEASE OF LEGAL RIGHTS. READ AND UNDERSTAND BEFORE SIGNING.

ACCEPT AND AGREE:

Guest Signature ___________________________________ Printed Name _______________________ Date ________

Wash U Student Host Signature _________________________ Printed Name _______________________ Date ________

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