

CALIFORNIA STATE POLYTECHNIC UNIVERSITY, POMONA
ASSOCIATED STUDENTS, INC. CAMPUS RECREATION
BRONCO RECREATION AND INTRAMURAL COMPLEX

RELEASE OF LIABILITY, PROMISE NOT TO SUE, ASSUMPTION OF RISK AND
AGREEMENT TO PAY CLAIMS; WAIVER

Activity: All activities of any kind occurring within the Bronco Recreation and Intramural Complex and/or under its auspices, including but not limited to the use of the climbing wall, swimming pool, platforms, fitness equipment, locker rooms, and other facilities; participation in any personal training, private instruction, group instruction, program, or class; participation in any intramural sports; and otherwise engaging in any supervised or unsupervised activity within the Bronco Recreation and Intramural Complex, any activity accessed through the Bronco Recreation and Intramural Complex, and/or any activity organized through Associated Students, Inc. Campus Recreation.

Activity Date(s) and Time(s): This is valid for the length of membership*

Activity Location(s): The Bronco Recreation and Intramural Complex on the premises of California State Polytechnic University, Pomona, and wherever else an Activity described above occurs.

In consideration for being allowed to enter the Bronco Recreation and Intramural Complex for any purpose and/or to participate in any Bronco Recreation and Intramural Complex Activity, on behalf of myself and my next of kin, heirs and representatives, **I release from all liability and promise not to sue** the State of California; the Trustees of The California State University; California State Polytechnic University, Pomona and their employees, officers, directors, volunteers and agents (collectively "University") and the Associated Students, Inc. Cal Poly Pomona and their employees, officers, directors, volunteers and agents (collectively "Auxiliary Organization") from any and all claims, **including claims of the University's or Auxiliary Organization's negligence**, resulting in any physical or psychological injury (including paralysis and death), illness, damages, or economic or emotional loss I may suffer because of my entering the Bronco Recreation and Intramural Complex, including travel to, from and during my visit to Bronco Recreation and Intramural Complex.

This release also encompasses the ASI's use of my image (photographs and videos) and recorded audio on the ASI website, via livestreaming, in print and any and all promotional material.

I certify that I have no undisclosed injuries, nor any undisclosed medical, physical, mental, or other condition that may affect my ability to safely participate in the Activity. If I cannot safely participate in the Activity without an accommodation, I will advise the staff in advance of my visit so that a reasonable accommodation, if any, may be found.

I am voluntarily entering the Bronco Recreation and Intramural Complex and/or participating in a Bronco Recreation and Intramural Complex activity. I am aware of the risks associated with traveling to/from and participating in this Activity, which include but are not limited to physical or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, and/or death. I understand that these injuries or outcomes may arise from my own or other's actions, inaction, or negligence; conditions related to travel; or the condition of the Bronco Recreation and Intramural Complex and/or activity location(s). **Nonetheless, I assume all related risks, both known or unknown to me, of my**

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presence in the Bronco Recreation and Intramural Complex and/or participation in Bronco Recreation and Intramural Complex activities, including travel to, from, and during my visit to the Bronco Recreation and Intramural Complex.

I agree to **hold** the University and Auxiliary Organization harmless from any and all claims, including attorney's fees or damage to my personal property that may occur as a result of my presence in the Bronco Recreation and Intramural Complex and/or participation in Bronco Recreation and Intramural Complex activities, including travel to, from, and during my visit to the Bronco Recreation and Intramural Complex. If the University and/or the Auxiliary Organization incur any of these types of expenses, I agree to reimburse the University and/or the Auxiliary Organization. If I need medical treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I have been informed and understand there remains a risk of exposure to COVID-19. I understand that regardless of any precautions taken, an inherent risk of exposure to COVID-19 will exist and accept this risk.

*This waiver is valid for the length of your membership regardless of your membership category and whether your membership is active or inactive.

I am 18 years or older. **I understand the legal consequences of signing this document, including (a) releasing the University and the Auxiliary Organization from all liability, (b) promising not to sue the University and Auxiliary Organization, (c) and assuming all risks of my presence in the Bronco Recreation and Intramural Complex and/or participation in Bronco Recreation and Intramural Complex activities, including travel to, from, and during my visit to the Bronco Recreation and Intramural Complex.**

I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms.

I have read this document, and I am agreeing to it freely. No other representations concerning the legal effect of this document have been made to me.

Participant's Signature

Date

Participant's Name (Print)

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Participant is under 18 years of age:

I am the parent or legal guardian of the Participant. **I understand the legal consequences of signing this document, including (a) releasing the University and/or Auxiliary Organization from all liability on my and the Participant's behalf, (b) promising not to sue on my and the Participant's behalf, (c) and assuming all risks of the Participant's presence in the Bronco Recreation and Intramural Complex and/or participation in Associated Students, Inc. Campus Recreation activities, including travel to, from, and during my visit to the Bronco Recreation and Intramural Complex.** I allow Participant to visit the Bronco Recreation and Intramural Complex and/or participate in Associated Students, Inc. Campus Recreation activities. I understand that I am responsible for the obligations and acts of Participant as described in this document. I agree to be bound by the terms of this document.

I have read this two-page document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

Signature of Minor Participant's Parent/Guardian

Date

Name of Minor Participant's Parent/Guardian (Print)

Minor Participant's Name

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USER POLICIES AND RESPONSIBILITIES

I agree to read and comply with all policies in the Bronco Recreation & Intramural Complex Facility Use Manual(<https://asi.cpp.edu/wp-content/uploads/2024/05/BRIC-Facility-UsePolicy-Senate-APPROVED-4-26-2018-1.pdf>) as well as any policies specific to programs of Associated Students, Inc. Campus Recreation (<https://asiportal.cpp.edu/Program>). Additionally, I understand that Associated Students, Inc. Campus Recreation programs and services are governed by the California State Polytechnic University, Pomona Student Conduct Code (<https://www.cpp.edu/studentconduct/student-conduct-code.shtml>) and all other University safety, security and facility standards. I acknowledge that use of the Bronco Recreation and Intramural Complex facilities and participation in Associated Students Inc. Campus Recreation programs and services is a privilege and if I engage in unacceptable or irresponsible behavior, my access may be modified or revoked indefinitely.

Participant's Signature

Date

Participant's Name (Print)