



Spouses Intramural Registration Form

Today's Date: _____

Name: _____ Birth Date _____

Street Address: _____

City/State/Zip Code: _____

Cell Phone #: _____ E-mail Address: _____

Emergency Contact Information: Name _____

Cell Phone # _____

Their relationship to you _____

Your relationship to Northwest University (i.e. spouse of NU student, alumni, etc.):

You are participating in what intramural sport? _____

Northwest University Intramural Sports

Assumption of Risk; Release of Liability; Indemnification; Publicity Release

I, the undersigned, in consideration for the opportunity to participate in Northwest University's Intramural Sports program ("Program"), agree as follows:

1. Assumption of Risk. I understand and agree that the Program involves my participation in individual or team sports with Northwest University students and employees, and that such sports involve dangerous risks and hazards that may result in my injury or even death. I am aware of the risks and hazards of the particular Program in which I participate. I also understand and agree that the Program in which I will be involved may result in damage or loss to my personal property either due to the environment or my own acts or omissions or the acts or omissions of others. I understand and agree that I am solely responsible for the protection and security of my personal property. I knowingly and voluntarily assume all risks of participating in the Program, including but not limited to, injury sustained through forces of nature, falling, slipping, collisions, impacts or other causes and any other accident or illness that may occur arising from or related to my participation in the Program, and any damage or loss to my personal property. I agree to follow the policies, procedures and guidelines of Northwest University, and to engage in the Program in a safe and appropriate manner. I acknowledge that Northwest University encourages me to consult with my physician before participating in any Program, and to wear a medical alert bracelet or neck tag indicating any medical information I think appropriate.

2. Release of Liability; Indemnification. On behalf of myself, my heirs, legal representatives, and assigns, I release and agree to indemnify Northwest University, and its directors, officers, administrators, employees, volunteers, and other agents (all collectively referred to as "Releasees") from all claims, damages and other liability for any injuries, loss of life, property loss or other damage I may sustain arising from or related in any way to my participation in the Program (collectively referred to as "Claims"), even if arising out of the negligence on the Releasees. Provided, however, the provisions of this Section 2 do not apply to Claims against a Releasee arising out of such Releasee's intentional misconduct or gross negligence.

3. Insurance. I have adequate accident and health insurance, and I agree that such insurance shall be in effect at all times during which I participate in the Program. I agree I shall not hold Northwest University responsible for such insurance coverage.

4. Photography/Publicity Release. I hereby give to Northwest University my permission and all rights to copyright, use, publish, exhibit, display, broadcast or print (in any medium) my image, name and any interview comments or responses in connection with any Northwest University publication (whether in print, electronic or other form, and whether posted on the Internet or otherwise published) or in connection with any Northwest University promotional purpose. I understand I will receive no additional compensation or consideration for such permission and rights.

NOTE: READ CAREFULLY BEFORE SIGNING. THIS DOCUMENT CONTAINS A RELEASE OF CLAIMS.

Participant Signature: _____ **Date:** _____

Name: _____ **ID #:** _____

Phone Number: _____ **E-mail:** _____

Address: _____ **Box #:** _____