

# Pellissippi State Community College

## HOLD HARMLESS AGREEMENT FORM

1. I PROMISE NOT TO SUE PELLISSIPPI STATE COMMUNITY COLLEGE WHILE I AM PARTICIPATING IN THIS ACTIVITY: \_\_\_\_\_ (hereinafter referred to as "activity" I release and covenant not to sue Pellissippi State Community College, the Tennessee Board of Regents of the State University and Community College System of Tennessee, the State of Tennessee, and all employees and agents of these parties (hereinafter referred to as "releases") from all claims related to any loss that may be sustained by me, including loss of life, or to any property belonging to me, whether caused by the negligence of releaseses or otherwise, while participating in this activity, or while on the premises where this activity is being conducted.
2. I AM AWARE OF THE RISKS OF CHOOSING TO PARTICIPATE IN THIS ACTIVITY, I ACCEPT RESPONSIBILITY FOR THE RISKS: The activity has been explained to me including the risks. These risks include \_\_\_\_\_. I voluntarily choose to participate in this activity. I voluntarily assume full responsibility for any risks of loss, property damage or personal injury, including death, that may be sustained by me as a result of participating in this activity, whether caused by the negligence of the releasee or otherwise.
3. I WILL REIMBURSE PELLISSIPPI STATE COMMUNITY COLLEGE FOR ANY COSTS THEY INCUR BECAUSE OF MY PARTICIPATION IN THIS ACTIVITY: I agree to indemnify the releaseses for any loss or costs, including medical bills, court costs and attorneys' fees, that they may incur due to my participation in this activity, whether this loss is a result of the negligence of releaseses or otherwise.
4. THIS AGREEMENT WILL ALSO PREVENT MY FAMILY FROM SUING PELLISSIPPI STATE COMMUNITY COLLEGE: It is my intent that this Agreement will bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased. This Agreement will be deemed as a Release and Consent not to sue regarding any claims these parties may have against releaseses relating to my participation in this activity, whether these claims arise out of the negligence of releaseses or otherwise.
5. This Agreement will be construed in accordance with the laws of the State of Tennessee.

In signing this Agreement, I acknowledge that I have read it and understand it, and that I sign it voluntarily.

Hold Harmless forms will be signed by participants and kept on file in the advisor's office before departing or participating in the activity.

\_\_\_\_\_  
Participant Name (Please Print)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

If under eighteen (18) years old, signature of parent or legal guardian required.