Ateneo de Zamboanga University

WAIVER OF LIABILITY

I, (Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby agree to the guidelines set forth by the Ateneo de Zamboanga University for the use of the Ateneo Mascot Costume. I acknowledge that the use of the Ateneo Mascot Costume is expressly conditioned on my agreement to each of the terms of this document.

I hereby understand and acknowledge that wearing of the Ateneo Mascot Costume may expose me to many inherent risks, including accidents, injury or illness. I assume all risk of injuries associated with the use of the Ateneo Mascot Costume, but not limited to, contact with event organizers and/or participants, the effects of the weather, including high heat and/or humidity, and all other such risks being known and appreciated by me.

I hereby acknowledge my responsibility in communicating any physical and psychological concerns that might conflict with my use of the Ateneo Mascot Costume.

I declare that I am physically fit and mentally capable of performing the physical activity I choose to participate in.

I declare that I have read and understood the stipulations in this WAIVER OF LIABILITY and in consideration with my consent of my wearing the Ateneo Mascot Costume, I agree, for myself and anyone entitled to act on my behalf, to hold harmless and I release the Ateneo de Zamboanga University, its staff and employees, organizers, representatives, from any responsibilities, liabilities, demands, or claims of any kind arising out of my wearing the Ateneo Mascot Costume.

By my signature I indicate that I have read and understand this WAIVER OF LIABILITY. I am aware that this is a waiver and release of liability and I voluntarily agree to its terms.

Name (Please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In case of emergency, contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_