

**LOYOLA UNIVERSITY MARYLAND**  
**DEPARTMENT OF RECREATIONAL SPORTS**  
**FITNESS & AQUATIC CENTER (FAC)**

**ADULT REQUEST TO PARTICIPATE & RELEASE AGREEMENT**

Name (Print) \_\_\_\_\_

Birth Date \_\_\_\_\_  
(MM/DD/YYYY)

I, the above named individual, am at least 18 years of age and have voluntarily applied to participate in Loyola University Maryland's Recreational Sports program and/or use its Fitness and Aquatic Center facilities. By my signature below, I acknowledge that participation in recreational sports activities and use of the Fitness and Aquatic Center facilities involves inherent risks that may result in personal injury, illness and even death, and I understand and appreciate the nature of such hazards and risks. I have voluntarily chosen to participate in Department of Recreational Sports programs and/or use the Fitness and Aquatic Center facilities and assume all such dangers and risks. (See Addendum A, if applicable, for specific risks and information.)

I agree to abide by all rules and regulations of the Loyola Recreational Sports programs and facilities and recognize that privileges may be revoked if violations occur. I have received and read a copy of the rules and regulations and understand that Loyola University Maryland, Inc. may revise them from time to time.

I understand that use of the Fitness and Aquatic Center facilities and participation in various Recreational Sports activities may require a minimum level of fitness for safe participation. I also understand that Loyola Recreational Sports recommends a physical examination to determine one's level of fitness prior to participation. I understand that Loyola University Maryland, Inc. does not screen, medically or otherwise, individuals to participate in its Recreational Sports activities and use its Fitness and Aquatic Center facilities. I understand that it is my sole responsibility to make certain that I am physically fit and healthy to participate in the activities and programs offered by Loyola University Maryland, Inc. in conjunction with its Recreational Sports department. I understand that Loyola University Maryland does not provide medical treatment. Further, I understand that Loyola Recreational Sports does not provide medical, health or other insurance to its Fitness and Aquatic Center members or program participants and their guests.

I understand that my participation in Recreational Sports programs may require transportation to a location away from the Loyola University campus, and I am aware that Loyola University provides drivers in automotive vehicles owned or leased by the College with auto liability insurance. I am aware that Loyola University does not provide insurance for the use of personal vehicles (vehicles not owned or leased by Loyola University), even if such vehicles are used in conjunction with a Recreational Sports activity or program. The owners/drivers of personal vehicles shall be responsible for liability arising out of any accidents or injuries.

I certify that I am fully responsible for my participation in the Loyola Recreational Sports programs and use of the Fitness and Aquatic Center facilities. In consideration of the opportunity to participate and use the Fitness and Aquatic Center facilities and for other good and valuable consideration, the receipt and sufficiency of which are acknowledged, I knowingly and voluntarily hereby forever **RELEASE LOYOLA UNIVERSITY MARYLAND, INC., ITS TRUSTEES, OFFICERS, INSTRUCTORS, EMPLOYEES, VOLUNTEERS, AND AGENTS AND AGREE TO INDEMNIFY AND HOLD THEM HARMLESS FROM ANY AND ALL CLAIMS, LIABILITY FOR BODILY INJURY, PROPERTY DAMAGE, OR WRONGFUL DEATH CAUSED BY ANY REASON WHATSOEVER**, resulting from my participation in Loyola's Recreational Sports programs and activities and use of its Fitness and Aquatic Center facilities. Further, I expressly hereby forever **RELEASE, DISCHARGE, AND HOLD HARMLESS LOYOLA UNIVERSITY MARYLAND, INC. FROM ANY CLAIMS OR LIABILITY FOR INJURY SUSTAINED AT THE FITNESS AND AQUATIC CENTER AS A RESULT OF ANY ACTS OF ACTIVE OR PASSIVE NEGLIGENCE** on the part of Loyola University Maryland, Inc., its trustees, officers, instructors, employees, volunteers, or agents.

**I HAVE READ THE ABOVE RELEASE AGREEMENT, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.**

Participant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_  
(MM/DD/YYYY)

Loyola Employee's  
(Witness) Signature: \_\_\_\_\_

Date: \_\_\_\_\_  
(MM/DD/YYYY)

