Stockton

I have personally and willingly assumed responsibility of all known and unforeseen risks that may occur arising out of my participation in this program. On behalf of myself, and on behalf of my heirs, assigns, I hereby release, agree, and covenant to forever defend and hold harmless Stockton University and its officers, agents, servants, employees, Board of Trustees, and employees against any damage, claim, demand, liability, judgment, loss, expense, or costs arising from participation in this event whether due to intentional act or omissions or negligence of Stockton University or any of its employees, servants or agents or those of any participating organization. I acknowledge and agree that I am releasing Stockton University on behalf of myself, my heirs, assigns, and my estate. I understand that this release covers all claims, including those based on the negligence of the University, its employees, servants or agents, but does not include claims based on the willful and wanton misconduct of the University, its employees, servants or agents. I understand that by participating in this activity I shall be subject to the provisions of the New Jersey Tort Claims Act (N.J.S.A. 59:1-1 et seq.), the New Jersey Contractual Liability Act, (N.J.S.A. 59:13-1 et seq.); the New Jersey Charitable Immunity Act, (N.J.S.A. 2A:53A-7 et seq.), and other laws of the State of New Jersey regarding the State's and the University's liability for public participation in this program that I am financially responsible.

I certify that I have read this release, I am at least 18 years of age and that by my signature below, I bind myself, my heirs, assigns, administrators, and executors to this agreement.

Printed Name, Address and telephone number of participant. **Signature of participant.**

Name, telephone number and relationship of person traveling to notify in case of emergency

Revised: March 2, 2015