



**DISCLOSURE, DISCLAIMER, and WAIVER**

**Course: Experiential Facilitation & Programming**

**Instructor: Cheryl Schwartz**

**Term: Spring 2014**

**Student Name** \_\_\_\_\_

I understand and agree that some courses/programs offered through Extended Studies and Western State Colorado University may be dangerous and may involve risk and that I am cognizant of the risks and dangers inherent with this activity. I understand and assume all the dangers and risks associated with this course/program. I also understand that I am not required to participate in such courses, but that such participation is optional.

I agree not to use drugs or alcohol while participating in this course. I will bring no weapons, make no threats of violence or engage in any conduct that threatens the safety of others.

As lawful consideration for being permitted by Extended Studies and Western State Colorado University to participate in the referenced course/program, I do hereby release from any legal liability, agree not to sue, claim against, attach the property of or prosecute, and further agree to defend, indemnify, and hold harmless Extended Studies and Western State Colorado University and all of their officers, directors, members, organizations, agents, employees and instructors of any injury or death caused by or resulting from my participation in the activity described above whether or not such injury or death was caused by their negligence or from any other cause.

This agreement, made in the State of Colorado, County of Gunnison, shall in all respects be governed in accordance with the laws of the Sate of Colorado. Any action brought by either party to enforce any of the terms or conditions of this agreement shall be brought on in such counties. Each party consents to the jurisdiction and venue of the appropriate Court in such counties.

I acknowledge I have read and understood this Waiver and have signed it voluntarily.  
**This is a release of liability. If under 18 years of age, signature of parent or guardian is also required.**

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

\_\_\_\_\_  
Signature of Parent (if student is under 18) Date