

**BA/MD Olympics  
August 21, 2015**

**ASSUMPTION OF RISK**

In return for the acceptance of my participation in the activities of the BA/MD Olympics, I the participant named below agree as follows;

1. The participant should refrain from involvement in any activity which he or she deems in appropriate for him or herself.
2. The participant agrees to maintain an observant and cooperative attitude throughout the BA/MD Olympics.
3. Fully understands and acknowledges that; (a) there are risks and dangers inherent in participation BA/MD Olympics, including but not limited to those of bodily injury, partial and/or total disability, paralysis and death; (b) the social and economic losses and/or damages, which could result from those risks and dangers could be severe.
4. I here by acknowledge the inherent risks and hazards of the BA/MD Olympics. I acknowledge any claims for damage against the University of New Mexico or the Combined BA/MD Degree Program or its officers or employees for death, personal injury, or property damage which may occur as a result of my participation in the above mentioned activities would be governed by the New Mexico Tort Claims Act, which imposes limitations on the recovery of damages from state institutions and their public employees.
5. Participant understands that the Combined BA/MD Degree Program and the University of New Mexico, **STRONGLY** recommends that the participant have some type of medical and/or health insurance to cover any possible accidents that might occur while participating in the BA/MD Olympics.

**THE UNDERSIGNED HAS READ THE ABOVE ASSUMPTION OF RISK AND RELEASE AND WAIVER OF LIABILITY AND UNDERSTANDS THAT HE/SHE HAS GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAS SIGNED IT VOLUNTARILY.**

**PRINTED NAME OF PARTICIPANT** \_\_\_\_\_

**PHONE NUMBER OF PARTICIPANT** \_\_\_\_\_

**CONTACT PERSON IN CASE OF ACCIDENT** \_\_\_\_\_

**PHONE NUMBER OF CONTACT PERSON** \_\_\_\_\_

**SIGNATURE OF PARTICIPANT** \_\_\_\_\_ **DATE** \_\_\_\_\_

**SIGNATURE OF PARENT OR GUARDIAN IF**

**PARTICIPANT IS UNDER 18** \_\_\_\_\_ **DATE** \_\_\_\_\_