

**WESTERN CAROLINA UNIVERSITY  
ATHLETIC TRAINING SERVICES  
LIABILITY RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE**

This is a legally binding release made by, \_\_\_\_\_, to Western Carolina University.

I fully recognize that there are dangers and risks to which I may be exposed to while participating in the WCU Cheerleaders Fall Clinic hosted October 5, 2019.

I am aware that I must provide my own health insurance coverage. I understand that I am responsible for any expenses due to any injury I may suffer while participating.

I therefore agree to assume and take on myself all of the risks and responsibilities in any way associated with this activity. In consideration of and return for the opportunity, services, facilities, and other assistance provided to me by WCU in this activity. I release WCU (and its governing board, employees, and agents) from any and all liability, claims, and actions that may arise from injury or harm to me in connection with this activity. I understand that this release covers liability, claims, and actions caused entirely or in part by any acts or failures to act of WCU (or its governing board, employees or agents).

I recognize that this Release means I am giving up, among other things, rights to sue WCU, its governing board, employees, and agents for injuries, damages, or losses I may incur. I also understand that this Release binds my heirs, executors, administrators, and assigns, as well as myself.

I have read this entire Release. I fully understand it and I agree to be legally bound by it.

THIS IS A RELEASE OF YOUR RIGHTS. READ CAREFULLY BEFORE SIGNING.

\_\_\_\_\_  
(Releasor's Signature)

\_\_\_\_\_  
(If under 18, Parent/ Guardian Signature)

\_\_\_\_\_  
(Date)