I, the undersigned participant, am requesting participation in the Iloilo Doctors’ College,

_________________________________________  (Name of department and college)

Activity: ___________________________________________________________

that begins on _________________  and ends on _____________________

In consideration of my voluntary participation in the above captioned activity, I hereby waive all claims of action against Iloilo Doctors’ College and its auxiliary organizations; and their officers, directors, employees, and agents of all which are collectively hereinafter referred to as the “College” arising out of my participation in the activity and hereby release, hold harmless, and discharge the College from all liability in Connection therewith.

Knowing, understanding, and fully appreciating all possible risk, I hereby expressly, voluntarily, and willingly assume all risk and dangers associated with my participation in this activity. These risks could result in damage to property, personal and/or bodily injury or death.

I have read this waiver and release and understand the terms used in it and their legal significance. This waiver and release is freely and voluntarily given with the understanding that right to legal recourse against the College is knowingly given up in return for allowing my participation in the activity.

My signature on this document is intended to bind not only myself but also my successors, heirs, representatives, administrators, and assigns.

_________________________________________  ________________________
Participants signature      Date

_________________________________________  ________________________
Print Participant’s Name      Phone Number

_________________________________________  ____________________________
Parent’s/Guardian’s signature over printed name    Date
(if participant is a minor)

_________________________________________  ____________________________
Instructor’s Signature      Date

_________________________________________  ____________________________
Print Instructor’s Name

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