



Hold Harmless/Release Agreement for Activity at YSU

_____ (“Organization”) desires to bring its students and/or members (“Participants”) to Youngstown State University (“YSU” or “University”) for the following purpose or activity: _____ (“Activity”). In consideration for YSU permitting the Organization and its Participants to attend this Activity at YSU, the Organization and the Participants hereby acknowledge and agree to the following:

- (1) That the Organization has inspected, or immediately upon entering, will inspect such University premises and facilities and any such use thereafter constitutes an acknowledgement that such premises, facilities and equipment thereon have been inspected and the Organization finds and accepts same as being safe and reasonably suited for use;
- (2) That the Organization and the Participant’s participation in the Activity is entirely voluntary, and the Organization and the Participants are aware of, understand and accept all risks, hazards and dangers of participating in the Activity;
- (3) That the Organization and the Participants will abide by and follow all applicable University guidelines, rules, regulations, policies and standards of conduct as established by YSU. The Organization and the Participants understand that violation of any applicable guidelines, rules, regulations, policies, and standards of conduct may result in the removal of the Organization and/or any Participant; and
- (4) That the Organization and the Participants understand that any University employees, agents or volunteers participating in the Activity are not necessarily medically trained to care for any physical or medical problems that may occur during the Activity. The Organization and the Participants further understand that the University does not carry medical or liability insurance for the Organization and the Participants. The Organization acknowledges and agrees that that the Organization and the Participants have adequate health insurance for any injuries that may arise as a result of participating in the Activity.

NOW, THEREFORE, in consideration for the Organization and the Participants being permitted to participate in the Activity, the Organization, including, but not limited to the Participants listed on the attached roster, hereby agree to release, indemnify and hold harmless Youngstown State University, its Board of Trustees, agents, officers, employees, representatives and volunteers from any and all claims, liability, causes of action, direct, indirect, special or consequential damages, or costs, legal and otherwise, which may result from participation in the Activity, even if due to the negligence of Youngstown State University or its agents, officers, employees, representatives and volunteers.. The Organization and the Participants listed on the attached roster also agree to assume full responsibility for any bodily injury, death, or property damage, even if, due to the negligence of Youngstown State University, while participating in the Activity.

I have read the above terms of this Hold Harmless/Release Agreement, and the Organization and the Participants understand and voluntarily agrees to the terms and conditions contained herein and that we are giving up substantial rights. This Hold Harmless/Release Agreement is the entire agreement between the parties and shall be binding upon any heirs, administrators, executors, and assigns. The Organization and the Participants listed on the attached roster further expressly agree that this Agreement is intended to be as broad and inclusive as permitted by the laws of the State of Ohio, and that if any portion thereof is held to be invalid, it is agreed that the remaining language shall, notwithstanding, continue in full legal force and effect.

The undersigned acknowledges that they are authorized to execute this Agreement and bind the Organization and the Participants to the obligations and terms set forth herein.

Name of Activity: _____ Date(s) of Activity: _____

Location(s) of Activity: _____

Name/Title: _____

Signature: _____

Date: _____



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Organization Name: _____ Responsible Person: _____

	Participant Full Name	Age	Emergency Contact Info (Name/Phone #)
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