## **General Risk Waiver Agreement**

I understand the course(s) I have signed up for may include Physical activity, may be held off campus, or include a field trip. Please review the risks described below and check the box indicating your agreement to the terms and conditions.

## **Terms & Conditions**

I am aware that playing or practicing any athletic activity can be a dangerous activity involving MANY RISKS OF INJURY. I understand that the dangers and risks of some OLLI physical fitness courses of this nature can include -- but are not limited to - death, serious neck and spinal injuries (which may result in complete or partial paralysis or brain damage), serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular-skeletal system, and serious injury or impairment to other organs or aspects of my body and my general health and well-being.

Physical activities, while on an OLLI field trip or at an offsite location, may include walking, using stairs, getting in and out of a van/coach bus, standing for a period of time, etc. Risks inherent in this field trip include bodily injury due to: vehicle accident, tripping/falling while walking and getting in/out of vehicles, etc.

I acknowledge that all risks cannot be prevented. I represent that I am physically able, with or without accommodation, to participate in this field trip for this course, am able to use the equipment and/or supplies outlined in course description, and have obtained the required immunizations, if any.

Should I require emergency medical treatment because of accident or illness arising during the field trip, I consent to such treatment. I agree to be financially responsible for any medical bills incurred because of emergency medical treatment. I will notify the trip leader in writing if I have medical conditions about which emergency medical personnel should be informed.

I hereby authorize the instructor (or other appropriate UVM personnel) to obtain on my behalf first aid, emergency medical care, or, if necessary, admission to an accredited hospital, when such care is necessary for the treatment of any injuries that I may sustain while participating in any activity associated with UVM OLLI fitness and offsite activities and travel events. I also hereby consent to the administration of emergency medical treatment in the event that I am unable subsequent to such injury to give such consent as otherwise necessary. I agree to be responsible for all medical charges incurred by any hospitalization or treatment rendered pursuant to this authorization.

I hereby voluntarily assume all risks associated with participation and agree to hold harmless UVM, its agents, officers, and employees, including – but not limited to – the staff of UVM from any liability, claims, causes of action or demands of any kind and nature whatsoever which may arise by or in connection with my participation and any activities related to UVM OLLI classes, except in the event of gross negligence.

The terms of this Agreement shall serve as a release and assumption of risk for my heirs, estate, executor, administrators, assignees, and all members of my family.