



Continuing Education Programs
ASSUMPTION OF RISK, WAIVER AND GENERAL RELEASE OF ALL CLAIMS

University of Kentucky Robinson Forest

READ CAREFULLY BEFORE SIGNING AT THE BOTTOM.

I the undersigned being over eighteen (18) years old, desire to participate in activities associated with the continuing education and training program “_____” at the University of Kentucky’s Robinson Forest (the “Facility”).

As a condition of my participation, and in consideration of being afforded this opportunity to participate in this activity, I, for myself, my heirs, successors or assigns, hereby **assume any and all risks** attendant to these activities, including claims resulting from uses in any way resulting from or associated with the activities. I understand that I am responsible for my own safety, health and welfare during this activity. I acknowledge and agree that I am not required to participate in this activity, and that if at any time I feel uncomfortable in my own skills and abilities, I will refrain from participation. I understand that this activity is or can be hazardous, and includes or may include numerous physical hazards. The known risks for this activity includes risks that are very severe, such as but not limited to falling trees, limbs, or other falling objects, severe injuries from use of power equipment, as well as slip and falls and sprains, cuts, breaks, and other similar injuries that might result from use of the Facility or participation in this training as well as ingress and egress thereto.

I, for myself, my heirs, successors or assigns, hereby **waive** any and all claims that may result from participation in this activity and use of the University of Kentucky Facility, and hereby **release and hold harmless** the University of Kentucky, its Board of Trustees, agents, servants, and employees specifically including but not limited to the employees and agents associated with the Facility or this training, from any and all claims, demands, causes of action or damages which may accrue on account of bodily or personal injury, property damage, or death arising from the use of the Facility or this training.

I understand that this is a GENERAL ASSUMPTION OF RISK, WAIVER, AND GENERAL RELEASE OF ANY AND ALL CLAIMS OR CAUSES OF ACTION that I may have or might accrue as a result of the use of the Facility or this training.

The invalidity of any portion of this Agreement shall not affect the enforceability of the remaining portions.

READ CAREFULLY, THIS IS A PERMANENT RELEASE OF ALL CLAIMS OF ANY TYPE OR NATURE IN ANY WAY ASSOCIATED WITH USE OF THE FACILITY.

Signature

Date

Print Name

Date