

LAKELAND UNION HIGH SCHOOL

9573 State Hwy 70 • Minocqua, Wisconsin 54548-9000 • www.luhs.k12.wi.us

Waiver and Release for Facility Use Lakeland Union High School

I, _____, HEREBY WAIVE AND RELEASE Lakeland Union High School District (hereinafter, district) from liability pertaining to the matters set forth below. I understand that by signing this waiver and release, I willingly agree to assume complete responsibility for any risk of injury that may arise from my use of any district facilities or district property. On behalf of myself, my heirs, assigns, or next of kin, I waive all claims for damages, injuries, and death sustained to me or my property that I may have against the above named released party relating to such activity. I understand that the activities that I will participate in may cause serious injuries, including bodily damage, damage to personal property, and/or death. By this waiver, I assume any risk, take full responsibility, and waive any and all claims of personal injury, including bodily injury, personal property damage, and/or death relating to all activities associated with the district, including but not limited to use of its facilities, equipment and property. If I am injured from said activities, I will not hold released party responsible even if the injuries were caused by negligence on my part or the released party or any other party under or affiliated with the release party.

I do not have any physical limitations, medical ailments, or physical or mental disabilities that would limit or prevent me from participating in activities in the district's building or on its property. If required, I will obtain a medical examination and clearance.

In addition, I also agree to assume responsibility to care for district equipment and property while participating in the activities. This includes, but is not limited to, proper use of equipment, returning the equipment to its designated storage area, and the securing of both the area where activities occurred and the building.

I HAVE READ AND FULLY AGREE TO THE TERMS OF THIS WAIVER AND RELEASE. I UNDERSTAND AND CONFIRM THAT BY SIGNING THIS WAIVER AND RELEASE, I HAVE GIVEN UP CONSIDERABLE FUTURE LEGAL RIGHTS. I HAVE SIGNED THIS WAIVER AGREEMENT FREELY, WILLINGLY, VOLUNTARILY, UNDER NO THREAT OF DURESS AND WITHOUT INDUCEMENT, PROMISE OR GUARANTEE BEING COMMUNICATED TO ME. SIGNATURE IS PROOF OF MY INTENTION TO EXECUTE A COMPLETE AND UNCONDITIONAL WAIVER OF ALL LIABILITY TO THE FULL EXTENT OF THE LAW. I AM 18 YEARS OLD OR OLDER AND MENTALLY COMPETENT TO ENTER AND GRANT THIS WAIVER.

Activity/Event

Location

Participant

Date

For Lakeland Union High School District

Date