



PROVIDENCE
COLLEGE

VOLUNTARY RELEASE FORM
Assumption of Risk and Indemnity Agreement

Description of Activity: R.I. All State Choir Prep Day, Saturday, October 20, 2018 from 9:30 am – 3:00 pm in the Smith Center for the Arts – Ryan Concert Hall at Providence College

Date: Saturday, October 20, 2018

The undersigned person requests and is granted permission to participate in the R.I. All State Choir Prep Day sponsored by The Department of Music of Providence College as described above. The undersigned acknowledges that my participation is entirely voluntary. I also acknowledge that there are hazards and risks incident to participation and understand that Providence College assumes no responsibility of any nature whatsoever for actions of participant of any other person or entity involved with this R.I. All State Choir Prep Day on October 20, 2018.

In consideration of my participation I, the undersigned, on behalf of myself, my heirs, executors, administrators, personal representatives, successors, assigns, by these presents remise, release, forever discharge, and indemnify and hold harmless, Providence College, its trustees, administration, faculty, employees, staff, students, agents, successors, and assigns (hereinafter referred to collectively as “Providence College”), from and against any and all manner of action or actions, cause or causes of action, suits, debts, sums, of money and all other claims and demands whatsoever in law or equity which I now have, ever had, or in the future may have, for or by the reason or means of any matter or things from the beginning of the world to the date of these presents, against The Department of Music or “Providence College”, arising out of or in any way associated with, either directly or indirectly, my participation in the R.I. All State Choir Prep Day or for contribution or indemnification with respect to any claim made against me by any participant in the Event or any other person or entity in connection therewith.

This Release and Indemnification has been executed on behalf of myself, my heirs, executors, administrators, personal representatives, successors, and assigns and is binding upon myself and them either because I am Eighteen (18) years of age or older, or because my parents or legal guardian had consented as hereinafter provided. In addition I warrant that I have appropriate health insurance to cover any injury in the event said injury occurs when participating in the trip.

This instrument has been executed in and shall be interpreted according to the laws of the State of Rhode Island.

IN WITNESS WHEREOF, I have HEREUNTO SET MY HANDS THIS _____ DAY of _____, 20_____.

Witness

Participant

Parent/Guardian if Student is Under
18 Years of Age