



## Assumption of Risk & Release of Liability Form

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### SNHU Global Days of Service

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I hereby acknowledge my awareness that the University is not a sponsor or organizer of this volunteer opportunity and is simply helping to advertise the opportunities available to me. I acknowledge that my participation may expose me to risk of property damage and bodily or personal injury, including death, and I hereby acknowledge that I am aware of the risks involved and hazards connected to my participation, including but not limited to travel risks, and voluntarily agree to assume any and all such risks.

Knowing the risks, and in consideration of my participation in SNHU's Global Days of Service, individually and on behalf of any family, heirs, assigns, and personal representative(s), to the maximum extent permitted by law, I hereby assume these risks and release, waive, and forever discharge the University, the Board of Trustees of the University, their members individually, and their offices, officers, trustees, agents, and employees (the "Releasees") from liability for any and all harm, injury, claims, demands, rights, causes of action, costs, and expenses of whatever kind, arising from or by reason of any loss, damage, or injury sustained by me or caused to my property, or the consequences hereof resulting from or in any way connected with my participation in SNHU's Global Days of Service. I also attest that I am physically fit and sufficiently trained to participate in this event.

I also give permission for the free use of my name and/or likeness in any broadcast telecast, or written or pictorial account of the event.

I have read the agreement and do willingly signify my agreement for the consideration expressed and with a full understanding of its purpose by signing below. I represent that I am eighteen (18) years of age or older and am otherwise competent to execute this agreement.

**Signature:**

(Parent/Guardian if under 18):

**Name:**

**Date:**

**Address:**

**Student/Staff ID#**

(If Applicable):

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