ANNE ARUNDEL COMMUNITY COLLEGE

OPEN GYM ACCIDENTAL INJURY WAIVER AND PERMISSION FORM - PARTICIPANT UNDER 18

By signing below, I/we acknowledge and agree to the following:

- I/we understand that participation in the Anne Arundel Community College fitness center involves physical activity and carries a risk of injury.
- I/we accept full responsibility for any injuries, damages, losses, or expenses that may be incurred by our minor child as a result of participation, including but not limited to medical costs.
- I/we release and hold harmless Anne Arundel Community College, its Board of Trustees, employees, and agents from any and all liability or claims arising from our minor child's use of the fitness center.
- I/we understand that it is advisable to obtain and maintain appropriate insurance coverage in case of injury.
- I/we confirm that our minor child has no physical condition or injury that would prevent safe participation in fitness center activities.
- I/we give permission for our minor child to fully utilize the college fitness center.

By signing this form, I/we acknowledge that we have read, understood, and voluntarily accept the terms stated above.

| Participant Signature: | |
|-----------------------------------------------------|-----------|
| Parent/Guardian Signature (Required if student is u | nder 18): |
| Date: | |