## ANNE ARUNDEL COMMUNITY COLLEGE

## OPEN GYM ACCIDENTAL INJURY WAIVER - PARTICIPANT FORM

By signing below, I (the participant) acknowledge and agree to the following:

- I (the participant) understand that participation in the Anne Arundel Community College fitness center involves physical activity and carries a risk of injury.
- I (the participant) accept full responsibility for any injuries, damages, losses, or expenses I may incur as a result of my participation, including but not limited to medical costs.
- I (the participant) release and hold harmless Anne Arundel Community College, its Board of Trustees, employees, and agents from any and all liability or claims arising from my use of the fitness center.
- I (the participant) understand that it is advisable to obtain and maintain appropriate insurance coverage in case of injury.
- I (the participant) confirm that I have no physical condition or injury that would prevent me from safely participating in fitness center activities.

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

Participant Signature:	Date:
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