

RELEASE OF CLAIMS
(To be completed by student participate)

I, the undersigned, hereby acknowledge that I have been given the opportunity to participate in the drive day/race event hosted by the Grove City College [GCC] SAE Club at SwitchbackMX located at 2469 William Flynn Highway Butler, PA 16001.

As a condition of participating in the event, I hereby RELEASE, WAIVE, DISCHARGE, AND CONVENANT NOT TO SUE Grove City College, its officers, employees, Trustees, agents and students, from any and all claims, demands, liabilities and causes of action whatsoever arising out of or related to any loss, personal injury or death sustained by me arising out of any act of omission or commission, negligent or otherwise, committed during this social event or situations that may arise whether CAUSED BY THE NEGLIGENCE OF GROVE CITY COLLEGE, its officers, students, employees, Trustees and agents, or otherwise.

I also agree to assume all liability for and hereby agree to defend, INDEMNIFY AND HOLD HARMLESS Grove City College, its officers, employees, Trustees and agents, from and against any and all losses for injuries to or death of myself arising out of an incident or in connection with all acts of omission or commission, negligent or otherwise, committed during my participation in the event or for any related or unrelated activities, social events or situations that may arise from any and all reasonably incurred attorneys' fees in the defense of any such action or the enforcement of the provisions of this paragraph.

I also understand that participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and, I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases.

I further state that I am of lawful age and legally competent to sign this affirmation and release and I understand the terms herein are contractual and not a mere recitation and that I have signed this document as my own free act. I acknowledge that no oral representations, statements or inducements apart from this written agreement have been made to me.

Regardless of where the acts of omission or commission may occur, or where the injury to me or to others may occur, I hereby agree that this release shall be governed, controlled and interpreted under the laws of the Commonwealth of Pennsylvania.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND AN INDEMNIFICATION AND HOLD HARMLESS AGREEMENT BETWEEN ME AND GROVE CITY COLLEGE, ITS OFFICERS, EMPLOYEES AND AGENTS.

It is my express intent that this RELEASE AND HOLD HARMLESS AGREEMENT shall bind me, my personal representative, heirs and assigns.

IN WITNESS WHEREOF, AND INTENDING TO BE LEGALLY BOUND, I execute this release this ___ day of _____, 2026.

Name

Date