Assumption of Risk Agreement
Early College Program

Description: The Participant is a minor student, or a student under the care of a Parent or Legal Guardian, who wishes to take courses from Idaho State University (ISU). The Participant's Parent or Legal Guardian represents that the Participant is not yet 18 years of age and/or is still under their care. The Parent or Legal Guardian represents that they are competent to sign this form on behalf of the Participant and both the Participant and the Parent or Legal Guardian agree to the following:

Assumption of Risk: In consideration for the opportunity to participate in the Early College Program, the Participant voluntarily agrees to assume all risks involved in their participation. The Participant understands and acknowledges there are inherent and unanticipated risks that may include but are not limited to: injuries related to slip, trip, and fall incidents, injuries related to class or lab settings, such as cuts, bruises, burns, injuries to the face and head, broken bones, internal injuries, paralysis, risk of negligence from self or other students, risk of negligence of campus visitors or volunteers, risk of lost or stolen personal belongings and other foreseeable and unforeseeable risks of injury or death that may occur that ISU cannot specifically anticipate and list here. The Participant confirms they have reviewed the program description and verify they have no physical or mental condition which would endanger themselves or others by participating in this program. The Participant verifies they have the emotional and intellectual maturity necessary to participate beneficially in the university environment. The Participant agrees to follow all campus and classroom rules, instructions, safety protocols.

The Participant understands that the law and culture of higher education generally presumes that university students are mature adults capable of independently evaluating their environment and independently attending to their needs. The Participant understands that they will voluntarily enter into an adult environment; that ISU will treat the Participant as an adult within that environment; and that the Participant accepts fully the rights and responsibilities of an adult within that environment. In particular, the Participant understands that they will be taking college level courses and that the academic environment will encourage free discussion and open inquiry of sometimes controversial subjects.

The Participant acknowledges ISU does not provide health and accident insurance for participants and agrees to be financially responsible for their own medical expenses. The Participant further agrees that in the event emergency medical treatment becomes necessary and they are unable to communicate, ISU staff or emergency medical personnel may authorize or conduct treatment or care on the Participants behalf as appears reasonable under the circumstances.

Participant: I, the Participant, have read, understand, and agree to the above:

__________________________________________  ________________________________________  ___________
Printed Name of Participant Signature Date

Parent or Legal Guardian: I am the parent or legal guardian of the Participant above. I have read this Agreement and voluntarily agree for myself and the Participant to be bound by its terms.

__________________________________________  ________________________________________  ___________
Printed Name of Parent/Guardian Signature Date