



## WAIVER AND RELEASE

I, the undersigned, intend to participate as an actor in \_\_\_\_\_ (“Activity”). I understand that I am not an employee of Biola University and will not receive any compensation or benefits for my services and that Biola University nor its students **do not provide worker’s compensation insurance for such participants**. I understand that in this Activity there is a risk of injury, damage and loss to me, and I agree to **assume all risks and responsibilities** surrounding my participation. By signing this form, I, on behalf of myself, my heirs, assigns, legal and personal representative(s), agree, to the maximum extent permitted by law, to **release, waive, discharge and covenant not to sue** Biola University, Inc., its trustees, officers, representatives, agents and employees (hereinafter, collectively “BIOLA”) from liability from any and all claims, demands, costs, liabilities, actions, or causes of action, including the negligence of BIOLA, resulting in personal injury, accidents, or illnesses (including death) and property loss arising from my participation in this Activity. Further, I, on behalf of myself, my heirs, assigns, legal and personal representative(s), agree to **indemnify and hold harmless** BIOLA from any and all claims, demands, costs, liabilities, actions, or causes of action (including attorney fees and court costs) on account of damage to personal property, or personal injury, or death which may result from my participation in this Activity.

I have read and understand the foregoing provisions and agree to abide by the terms thereof.

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Signature

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Date

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Printed Name