



UNIVERSITY OF PITTSBURGH

Research Training Program (“Program”) for Students in the Health Sciences

RELEASE

This is a legally-binding Release, Waiver, Discharge and Covenant Not to Sue made by me, _____, “” to the University of Pittsburgh - Of the Commonwealth System of Higher Education (“University”) and to others.

It is my desire to participate in _____, at _____ on _____ (“Activity”). I fully recognize that there are dangers and risks to which _____ may be exposed by voluntarily participating in the Activity. Examples of these dangers and risks are injuries or conditions including, without limitation, muscle or ligament damage, lacerations, abrasions, contusions and fractures, heart attack, as well as other injuries or conditions, up to and including serious physical injury or impairment or loss of life. I appreciate the character of the risk taken and, voluntarily assume all risk of harm. I understand that the University does not require me to participate in the Activity, but I want to do so, despite the possible dangers and risks and despite this Release.

I therefore agree to assume and take on myself all of the risks and responsibilities in any way associated with participation in the Activity. In consideration of and return for the opportunities, services, facilities, equipment or other things provided to me by the University, I HEREBY **RELEASE THE UNIVERSITY (AND ITS [or “EACH OF THEIR,” if releasing entities in addition to University] DIRECTORS, TRUSTEES, OFFICERS, PARTNERS, PRINCIPALS, EMPLOYEES, STUDENTS AND AGENTS) (COLLECTIVELY THE**

“UNIVERSITY RELEASEES”) FROM ANY AND ALL LIABILITY, CLAIMS AND ACTIONS THAT MAY ARISE FROM INJURY OR HARM TO ME, UP TO AND INCLUDING DEATH, AND FROM DAMAGE TO MY PROPERTY, IN CONNECTION WITH PARTICIPATION IN THE ACTIVITY. I UNDERSTAND THAT THIS RELEASE COVERS LIABILITY, CLAIMS AND ACTIONS CAUSED ENTIRELY OR IN PART BY ANY ACTS OR FAILURES TO ACT OF THE UNIVERSITY RELEASEES, INCLUDING BUT NOT LIMITED TO NEGLIGENCE, MISTAKE OR FAILURE TO SUPERVISE.

I recognize that this Release means I am giving up, among other things, rights to sue the University Releasees for injuries, damages or losses I may incur. I also understand that this Release binds my heirs, executors, administrators and assigns, as well as me.

Further, I agree to defend, indemnify and hold harmless the University Releasees from and against any claim, damage, liability, injury, expense or loss, including but not limited to, reasonable attorney fees, by reason of any suit, claim, demand, judgment or cause of action, initiated by me, or any other person, arising out of my participation in the Activity.

I assure the University that, to the best of my knowledge, information and belief, I am physically able to participate in the Activity without any undue or unusual risk to myself or to others.

I have read this entire Release, I fully understand it and I agree to be legally bound by it.

Witness:

THIS IS A RELEASE OF YOUR RIGHTS.
READ CAREFULLY BEFORE SIGNING.

Releasor Signature

Date