

ASSUMPTION OF RISK AND RELEASE OF LIABILITY

I, \_\_\_\_\_, in consideration of the opportunity to participate in a volleyball league with AIA (“Volleyball”) to take place at \_\_\_\_\_ (the “Field”), acknowledge and assume any and all risk of accident and/or injury inherent in participation in Volleyball and potential hazards therein. I agree that The University of Tennessee (“the University”) will not be responsible or liable for any personal injury, including, but not limited to, death, to me or damage to my property, due to Volleyball, even if such injury is caused by the negligence of the University or its employees and/or agents. Further, I release, waive, and discharge the University and its trustees, officers, employees, and any other agents from liability for any such injury to me or damage to my property, due to Volleyball, that may occur now or at any time after signing this agreement, even if such injury is caused by the negligence of the University or its employees and/or agents. I acknowledge that any claims for personal injury, death, or property damage resulting from the negligence of University employees must be submitted to the Claims Commission for the State of Tennessee in accordance with T.C.A. Section 9-8-307, et seq., as amended. I assume liability for and agree to indemnify and to hold the University and its trustees, officers, employees, and any other agents harmless for all claims or damages caused, in whole or in part, by me and any negligent, intentional, or other act or omission on my part.

I agree to abide by all regulations, policies, and procedures of the University while participating in Volleyball in order to maintain a maximum level of safety.

I acknowledge that my participation in Volleyball is wholly voluntary.

I am above the age of 18 and have read the above statement and agree to the conditions set forth herein. This Agreement binds the members of my family and spouse, and my estate, heirs, administrators, personal representatives, assigns, and any other person entitled to act on my behalf. This Agreement shall be construed under the laws of the state of Tennessee without regard to its conflict of law provisions. If any portion of this is held to be invalid, illegal, or unenforceable, the remaining portion shall be in full force and effect.

I have read this document before signing it and sign this document of my own free act and deed, intending to be bound by the promises I have made herein.

\_\_\_\_\_  
Name (*Please Print*)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address