

SOUTH CAROLINA

Master
Naturalist
A CLEMSON EXTENSION PROGRAM



South Carolina Master Naturalist Program Training
**GENERAL RELEASE OF LIABILITY, WAIVER OF CLAIMS, EXPRESS
ASSUMPTION OF RISKS, AND HOLD HARMLESS AGREEMENT**

In consideration of participating in the South Carolina Master Naturalist field-based training (the “Training”), located in _____, South Carolina, offered _____, 20__ by the South Carolina Master Naturalist Program of Clemson University Cooperative Extension, I hereby agree as follows:

I understand that participation in this program can be physically strenuous and may include hiking or walking remote areas on uneven terrain with easy, moderate to severe elevation changes. I verify that I have consulted with a physician and I am in sufficient physical condition to participate in the Training.

I fully understand that there are potential risks and hazards associated with the South Carolina Master Naturalist Training, including, but not limited to, possible injury or loss of life. These risks and hazards include but are not limited to elevation changes, exposure to toxic plants and venomous animals, uneven terrain, dehydration, sun exposure or heat stroke, insect bites and stings, broken bones, muscle strains or injuries. I further understand that during the Training, I may be visiting undeveloped locations and interacting with persons that are not associated with or under the control or supervision of the Releasees. Despite the potential risks and hazards associated with the Training, I wish to proceed, and freely accept and assume all risks and hazards that may arise from my participation in the Training and that could result in loss, illness, personal injury, death, or property damage to me or to my property, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES or otherwise. I acknowledge that the Training is a required component of the South Carolina Master Naturalist Program in which I am freely and voluntarily participating; that I will receive no academic credit toward a formal Clemson University degree for such participation; and that I am in no way required to participate in the South Carolina Master Naturalist Program but do so by choice.

I further hereby agree to indemnify and hold harmless the Releasees from any judgment, settlement, loss, liability, damage, or costs, including court costs and attorney fees for both the trial and appellate levels, that Releasees may incur as a proximate result of any negligent or deliberate act or omission on my part during my participation in the Training.

In signing this agreement, I acknowledge and represent that I have read and understand it; that I sign it voluntarily and for full and adequate consideration, fully intending to be bound by the same; and that I am at least eighteen (18) years of age and fully competent.

I, _____, for myself and my estate, heirs, administrators, executors, and assigns, hereby release and hold harmless the, the Clemson University Board of Trustees, and their officers, directors, employees, representatives, agents, and volunteers (collectively, the “Releasees”), from any and all liability and responsibility whatsoever, however caused, for any and all damages, claims, or causes of action that I, my estate, heirs, administrators, executors, or assigns may have for any loss, illness, personal injury, death, or property damage arising out of, connected with, or in any manner pertaining to the Training, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES or otherwise.

I HAVE READ THIS AGREEMENT, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND VOLUNTARILY AGREE TO BE BOUND BY IT.

NAME (PRINTED) _____

SIGNATURE _____

DATE _____

WITNESS (PRINTED) _____

WITNESS SIGNATURE _____

DATE _____

1/2017