

Inter-Fraternity Council (IFC) Rush Week

Assumption of Risk and Release Waiver

By signing this Assumption of Risk and Release, the individual named below wishes to participate in the event, and recognized there are risks of damage or injury arising from the activities or participation in the Event.

By signing below, the participating individual agrees to assume the risks and responsibilities surrounding the participation in the Event. In addition, the participant (including heirs, assigns and personal representatives) agrees to release, hold harmless, and indemnify Inter-Fraternity Council, Alpha Sigma Phi, Phi Delta Theta, Missouri Western State University and its Board of Governors, from and against any claims, demands, actions, causes of action, lawsuits, expenses, or losses (including attorneys' fees) on account of property damage or personal injury (including death) arising out of or attributable to the individual's travel to or participating in the Event.

This Assumption of Risk and Release Waiver applies to the Inter-Fraternity Council and all of its individual chapters (Phi Delta Theta and Alpha Sigma Phi), Missouri Western State University and its Board of Governors.

The undersigned acknowledges that I have read and understands this document. By typing my name and G Number below, I am verifying this as my signature.

Executed as of this _____ day of _____, 20____.

PRINT NAME: _____ **G#** _____

Center for Student Involvement - IFC Grade Verification

NOTICE

All currently enrolled students are eligible for membership in a recognized student organization if they meet the standards outlined in the Student Organization Handbook. Students must have a minimum 2.5 cumulative grade point average to be a member of a Greek letter organization. Any organization that needs to confirm the eligibility of a member of a potential member, especially those needing a release of academic information, should complete this form. This includes Greek organizations engaging in recruitment and organizations needing to submit information to national/parent groups.

By signing this, I give permission to Missouri Western State University to validate my eligibility for membership in a recognized student organization. **By typing my name, I am verifying this as my signature.**

Print Name: _____

Contact phone #: _____

EMAIL: _____

Email address will be the main source of contact during Rush Week