

WAYNE STATE COLLEGE RECREATION CENTER RECEIPT & WAIVER

Wayne State College • 1111 Main Street • Wayne, NE 68787
Front Desk - 402-375-7482 • Director - 402-375-7521

Date _____

Received from:

Name _____

Phone Number _____ Parent/Guardian
Circle One

Cash _____ Check _____ By _____

Recreation Center Daily Fees _____

Punch Card _____

TOTAL _____

----- Wayne State College - Recreation Center Facility Waiver -----

Individuals over 19 are Required to Read and Sign this Waiver

My signature below confirms my consent to and my compliance with the following agreement: I wish for myself and/or my dependents (as listed below) to participate in various physical fitness activities available at the Wayne State College Recreation Center. I acknowledge that my/our participation in such activities may subject me/us to the risk of serious bodily injury, property damage, or other danger. I understand and freely assume the risk of any and all loss, including damage to property and personal injury, including serious bodily injury and/or death, that may be sustained by me/us as a result of my/our participation in such activities, whether caused by the negligence of Wayne State College, its Board, officers, administrators, agents, employees, or otherwise. On behalf of myself, my dependents, my personal representatives, heirs, assigns and next of kin, I hereby release, waive, and forever discharge the Board of Trustees of the Nebraska State Colleges, the Nebraska State College System, Wayne State College, and all Trustees, administrators, agents, employees, and students from any and all liability, including claims or lawsuits related to any property damage, property loss, bodily injury (including but not limited to, loss of life), or any other loss related to use of the Recreation Center facility. I understand that I am responsible to pay, or otherwise cover through insurance, any medical or hospital expenses, doctor bills or other expenses which could be incurred as a result of my use of the Recreation Center facility.

Printed Name

Age

Relationship

Signature

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____