



Pace University
The Civic Center Gymnasium
Release & Authorization

I, _____ (Print Name) hereby indicate my desire to participate in any programming offered and use of the equipment and facilities of the Civic Center Gymnasium ("Civic Center") of Pace University ("Pace" or "University"), located on Pace's New York City, New York campus between 5/29/2022 and 8/31/2022. My participation in any programming being offered and use of the Civic Center's equipment and facilities is completely voluntary. In consideration for being permitted to participate in any programming being offered and use of the Civic Center's equipment and facilities, I agree to the following:

1. To abide by all of Pace's applicable policies, rules, regulations and standards of conduct during and in connection with any programming being offered and use of the Civic Center, including but not limited to parking and security policies. I understand that violation of these policies, rules, regulations and standards may result in removal from any programming being offered and the Civic Center and the University's campuses, without refund of membership fees.
2. If I require an accommodation due to a disability and/or religious observances in order to participate in any programming being offered and to fully use the Civic Center's equipment and facilities, I will follow (or have already followed) the proper procedures for assessment and approval of such accommodation by the necessary University parties as reasonable. Such approval of accommodations must be granted prior to my use of the Civic Center's equipment and facilities and participation in any programming. Except as I have confirmed to Pace in a writing attached to this Release, I have no medical or psychological condition that would preclude or limit my use of the Civic Center's equipment or facilities or my participation in any programs offered by the Civic Center, and I am not taking any medication that would impair my ability to use the equipment or facilities or participate.
3. I authorize Pace, its employees, agents and representatives to act in any attempt to safeguard and preserve the health and/or safety during my use of the Civic Center's equipment and facilities or participation in a program offered by the Civic Center, including authorizing emergency medical treatment on my behalf and at my expense.
4. I agree for myself, my heirs and my personal representatives, to hold harmless, and forever release and discharge Pace and all its officers, agents and employees from and against any and all claims, demands, actions or causes of action, on account of damage to personal property, personal injury, or death which may result from my use of the Civic Center's equipment and facilities and my participation in Civic Center Programs and activities and incident thereto.
5. I acknowledge that I have read this entire document and understand its terms.
6. This release shall be construed in accordance with, and governed by, the laws of the State of New York. Any litigation relating to this Release or the Event shall be conducted in a court of competent jurisdiction in the State of New York, County of New York.

Date Participant's Name (Please print clearly)

Participant's Signature (If under 18 years of age, must be signed by parent or legal guardian)

Person to be Notified in Case of an Emergency:

Name: _____

Relationship: _____

Phone: (H) _____ (W): _____

Address: _____