Omega Psi Phi Fraternity, Inc.

Waiver Form

I, _____ (Parent or Guardian) of
Please print name

_____ a registered participant in an activity sponsored by
Please print name

Sigma Iota Chapter of Omega Psi Phi Fraternity, Inc., understand and agree that I am participating in this event on my own free will and accord and Sigma Iota Chapter, nor Omega Psi Phi Fraternity, Inc., nor its insurer(s) will share in or accept responsibility for any liability for bodily injury, property damage, medical expense or other loss that may arise from my participation in this event.

I further understand and agree, and have no expectation that **Sigma Iota Chapter or Omega Psi Phi Fraternity, Inc.**, will provide any form of security or other measure of safeguarding for this event, as there is no reasonable expectation that such will be necessary.

I further understand and agree that this event is considered a "no-fault" event by me, as well as **Sigma Iota Chapter and Omega Psi Phi Fraternity, Inc.**, and in the event of bodily injury, property damage, necessity of medical expenses or other loss, I agree to incur my own expenses without input or participation from **Sigma Iota Chapter or Omega Psi Phi Fraternity, Inc.**, or its insurer(s).

_____ _____
Signature of Parent or Guardian *Date*

_____ _____
Chapter Representative or Event Chair *Date*

_____ _____
Chapter Basileus *Date*

This form should be only used for athletic events and completed for all participants. Chapters should keep the waiver forms for possible liability issues and record keeping purposes.