

Customized Business Services Registration Form



CUSTOMIZED BUSINESS SERVICES

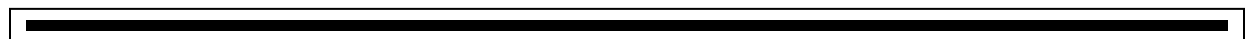
Please Print Clearly

NAME LAST		FIRST		MIDDLE	
HOME MAILING ADDRESS STREET/BOX			CITY	STATE	ZIP
LOCAL TELEPHONE NO.		WORK TELEPHONE & EXT.		BIRTH DATE (MO/DAY/YR)	

SYNONYM#	Course Code	PROGRAM TITLE	PROGRAM DATE(S)
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EMPLOYER

DATE DROPPED:	SIGNATURE:
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ASSUMPTION OF RISK AND RELEASE: Colorado Mountain College (CMC) values your safety and well-being and takes reasonable efforts to make its programs safe. However, CMC cannot eliminate all risks or guarantee your safety. By signing this form, you acknowledge that CMC courses may involve risks including damage or loss to personal property, personal injury, or death; and you acknowledge that you are voluntarily registering for classes at CMC with knowledge of and in spite of these risks.

I, the undersigned, knowing the risks, voluntarily choose to register for courses at CMC and I agree **(1)** to follow all reasonable safety precautions; **(2)** to ASSUME ALL RISKS of participation in CMC courses; and **(3)** to RELEASE, WAIVE, INDEMNIFY, DEFEND, and HOLD HARMLESS CMC for any injuries, losses, claims or liabilities of any kind arising out of my participation in CMC courses, unless caused by gross negligence or willful misconduct on the part of CMC.

	SIGNATURE	DATE
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Last revised July, 2009