I, the undersigned, hereby acknowledge that I am aware that by participating in the Orange Coast College Exercise Science Laboratory Program I will be engaging in the following activities which may be dangerous, hazardous and pose potential risk of severe and serious physical and emotional injury and illness: I will be performing various physical tasks such as strength, flexibility, and graded exercise tests. Resting measurements of cardiovascular function, body composition, metabolism and pulmonary function will also be performed. I understand that the strength and flexibility tests require maximal arm and leg performance and maximal trunk stretching. The graded exercise test begins at low work levels and will be advanced in stages, depending upon my work capacity. I understand that the test may be stopped any time by me or the instructor because of signs of fatigue, or I may stop when I wish because of personal feelings of fatigue or discomfort. My scores will be recorded on laboratory forms and statistical record books. The preservation of the confidentiality of the Laboratory’s record is through the use of identification numbers and laboratory files.

I understand that the procedures described above involve the following possible risks, discomforts, injuries and illness among others: There exists the possibility of certain physical changes occurring during the tests. These changes include, but are not limited to, infection from water or breathing apparatus, pulled or torn muscles during the strength/flexibility tests, and abnormal blood pressure, fainting, disorders of heart beat, and a possibility of heart attack form the graded exercise tests. CPR-certified personnel are present, the Para-Medical Emergency Service is within 1.5 miles, and the Student Health Center has emergency service to deal with injuries or unusual situations which may arise.

I understand that acceptance into the testing and exercise prescription program of the Exercise Science Laboratory is not a representation by the Orange Coast College Health and Physical Education Division that I am sufficiently “physically fit” and risk-free to participate in a program of physical activity. I represent and warrant that I am mentally and physically fit, capable, able and willing to participate in these activities without any limitations.

I understand that performing these tests and exercises is voluntary, and that participating in the tests is not a requirement for participating in the class or to receive credit for the course. I understand that I may terminate my participation in the program at any time. I have read this form and understand the test procedures that I will perform. Also, the procedures described herein have been explained to me both orally and in written form to my satisfaction.

In consideration of being permitted to participate in the Orange Coast College Exercise Science Laboratory Program, I hereby release, discharge, indemnify, and agree to hold harmless the Coast Community College District and its governing Board, Orange Coast College, and each of their trustees, employees, agents, teachers, volunteers and representatives free from any and all liability arising out of or in connection with my participation in the activities of the Exercise