Board of Regents for Higher Education CT State NORTHWESTERN

Activity Waiver Form

Student Na	me:				_ Banner ID#:		
	Last Name		First Name	MI			
State:	Zip Code:	Phone:			Email:		
Provided tr						your vehicle and passenger	s.
Location(s)	of activity or trip: [
Date(s) of a	ctivity or trip:						
Sponsoring	club/department:						
List the na	me and telephone nu	mber of a rela	ative or frier	nd who sho	uld be notified in	case of an emergency:	
Name:				Rela	tionship:		
Home Phor	ne:			Cell	Phone:		
Are you aller		or is there any n	nedical or hea	lth related in	formation that we she	ould be made aware of by you?	Īf

******I understand that I am responsible for my own transportation if I miss the provided transportation. ******

In consideration of being permitted to participate in the above listed activity (hereinafter called "the Activity") I, for myself, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and covenant not to sue **CT State Community College** – **Northwestern** and/or the Board of Regents for Higher Education (hereafter called "the College"), their Regents, officers, employees and agents and to indemnify them from liability for any and all claims resulting from personal injury, accidents or illnesses (including death), and property damage or destruction arising from, but not limited to, participation in the Activity.

I understand that participation in the Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises and sprains, 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks and concussions, to 3) catastrophic injuries including paralysis and death. I have read the previous paragraphs and I know, understand and appreciate these and other risks that are inherent in the Activity. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

I also agree to indemnify and hold the College harmless from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees, brought as a result of my involvement in the Activity and to reimburse them for any such expenses incurred. I further expressly agree that the foregoing waiver and assumption of risk agreement is intended to be as broad and inclusive as is permitted by the law of the State of Connecticut and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Finally, I have read this waiver of liability, assumption of risk and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend it by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Signature of Participant	Date	
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Signature of Parent/Guardian if Minor	Date	
Participant's Age (if minor): Birthday:		
CT STATE Community College Northwestern Guidelines for Participant Behavior		

CT State Community College – Northwestern sponsors field trips and special events for students as a means of providing comprehensive and diverse learning opportunities for our students. Field trips/event participants and their guests are expected to conduct themselves in a professional and positive manner as representatives of **CT State Community College – Northwestern**. All students and their guests are held to the *CT State Community College Student Code of Conduct* and all applicable laws. Every participant of the event/trip must abide by all applicable rules and regulations. Failure to follow operating guidelines, instructors/staff directives and/or the Guidelines for Participant Behavior may result in disciplinary action. Each student understands that once the student has signed the contract, the rules and requirements will be in effect throughout the entire trip/event.

- 1. **CT State Community College Northwestern** students, and their guests, are expected to conduct themselves in a manner that will not discredit himself or herself or the College.
- 2. Drugs or alcohol are not permitted on the field trip/event. Possession, use, sale, distribution, and/or transportation of alcohol, any controlled substance, illegal drug or drug paraphernalia is prohibited conduct.
- 3. No firearms, explosives (including fireworks), or other weapons are permitted on the fieldtrip/event. Transportation, storage, possession or use of these items is prohibited conduct.
- 4. Sexual harassment, sexual misconduct, lewd or indecent behavior, or sexual assault is prohibited conduct.
- 5. Physical abuse, threats, intimidation, harassment, coercion and/or other conduct, which threatens or endangers the health or safety of any person, is prohibited conduct.
- 6. Every student is responsible for making appropriate travel arrangements prior to and after the field trip/event.
- 7. Failure to comply with instructor/staff directives, engaging in prohibited conduct, or violation of any laws may result in disciplinary and/or legal action. Students may be discharged from the field trip/event and be responsible for transportation home under these circumstances.
- 8. Interfering with normal College activities including studying, teaching, research and recreation is prohibited.
- 9. The College does not have liability or automobile coverage for students driving themselves or other students to Collegesponsored events. Automobile insurance policies held by the students are the primary and only policies covering them for injuries to themselves and others, as well as damage to their vehicles or other vehicles.
- 10. Anyone with a history of medical problems should consult with their physician prior to the trip/event to be sure that they are in condition to make the trip or participate in the event. Any student with a medical problem and/or under the care of physician may be required to provide a medical release prior to the field trip/event.

I have read and understood all of the above rules and requirements and agree to accept the consequences as stated. I further understand that the chaperones are in charge and I will accept their authority during the entire course of the event/trip.

(Student Name Printed)

(Student Signature)

(Date)