

**RELEASE OF LIABILITY WAIVER FORM
&
INDEMNIFICATION AGREEMENT**

I wish to participate in the Field trip(s) associated with the _____ offered
Club/Org/Class
by Ridgewater College. I acknowledge that this is a voluntary activity and the college does not require me to participate. I knowingly and voluntarily assume the risk of any injuries, regardless of severity, and including death, and all risk of damage to or loss of property that I may incur due to negligence or accidentally while I am participating in these field trip(s).

In consideration for the opportunity to participate in these field trip(s), I, on behalf of myself, my agents, heirs, and next of kin, hereby release Ridgewater College, the _____ department and their respective employees, agents, members, and representatives and, if applicable, owners and lessors of premises used to conduct the event ("Releasees") from any responsibility or liability for personal injury, including death, and damage to or loss of property that I may incur due to negligence of the groups named above or my own negligence or due to accidental occurrences while I am traveling to or from, engaged in, or otherwise participating in these field trip(s).

On behalf of myself, my personal representatives, heirs, next of kin, successors and assigns, I hereby indemnify, save and hold harmless the State of Minnesota and its agents, officers, and employees from and against any and all claims of any nature including all costs, expenses and fees arising out of or resulting from my actions during these field trip(s) taking place during the academic school year _____.

Governing Law and Jurisdiction. The laws of the state of Minnesota shall govern the validity, construction and enforceability of this Agreement, without giving effect to its conflict of laws principles. All suits, actions, claims and causes of action relating to the construction, validity, performance and enforcement of this Agreement shall be in the courts of the State of Minnesota.

I certify to my knowledge there is no medical reason why I cannot safely participate in these field trip(s). I also certify to my knowledge of the policies contained in the Student Handbook. By signing I acknowledge my understanding that even while off campus I will be held to the Student Code of Conduct and the Drug and Alcohol Free policy.

By my signature, I signify that I have read and understand this release and agree to its terms.

Signature

Date

Print Name

Student ID Number

(over)

NOTICE

Participants under age 18 years must have this release co-signed by their parent or guardian.

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES**, to the fullest extent permitted by law.

Signature of Parent/guardian

Date

Print Name

Date

Please provide emergency contact information that will be used by college officials to notify your designee(s) in case of an emergency.

Name of Contact: _____

Relationship: _____

Contact information:

Phone Number(s): _____

