



Originally Issued: November 19, 2021

## **Student Travel Release and Assumption of Risk (Domestic)**

I, \_\_\_\_\_ [*printed name of participant*], in consideration of being permitted to accompany and/or participate in the Athens State University \_\_\_\_\_ trip to \_\_\_\_\_ during the time period of \_\_\_\_\_, 20\_\_ and all activities related to the same (such trip and related activities to be collectively referred to herein as the “Activity”), I individually (for myself, my heirs, executors, guardians, legal representatives, administrators, successors and assigns) do hereby release, acquit, hold harmless, and forever discharge Athens State University, (including their respective affiliates, owners, directors, sponsors, officers, volunteers, employees, and agents), from any and all actions and claims for all types of injuries, damages, costs, and compensation, that now exist or may hereafter arise involving or related in any way to my participation in said “Activity”.

I have fully read and understand this Agreement and all of its terms. I understand that this acknowledgment and assumption may affect my legal claims for damages. I am aware that this is a release of liability and a contract between myself and Athens State University. I nevertheless enter into this Agreement freely and voluntarily agree that it is binding upon me, my heirs, assigns, and legal representatives.



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I agree that the terms of this Agreement shall be binding and shall be governed by the laws of Alabama and that the terms of this document shall be admissible in evidence as a binding legal document between me and the persons and entities listed above in this Agreement.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
*[Signature of participant]*

### **PARENTAL AGREEMENT AND INDEMNIFICATION**

(To Be Completed where Participant Is Under the Age of Nineteen)

As a parent or natural guardian of the above-mentioned minor, I give permission to my child or ward to participate in the aforementioned "Activity". I have read and understand the above Assumption of Risk and Release Agreement, and on my behalf and on the behalf of my child or ward, I agree to all terms contained in the Agreement, and I specifically agree to release, indemnify, and hold harmless Athens State University (including their respective affiliates, owners, directors, sponsors, officers, volunteers, employees, and agents) with respect to any and all claims that may arise from the participation of the above named minor child in the aforementioned activity.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
*[Signature of parent or guardian]*