

CCD Field Trip Student Waiver of Rights, Assumption of Risks and Release of Liability Agreement

Name: _____	_____	_____
First	M.I.	Last
S#: S _____	Phone #: _____	
Email: _____ @student.ccs.edu		
Your official CCD email account is the only email CCD will accept for correspondence.		

Course: _____ Instructor: _____

Activity/Location: _____ Start/End Date: _____

By signing this form, I acknowledge that I am about to participate in a course, program, or activity that has inherent risks, hazards and dangers that cannot be eliminated. I acknowledge that these include, without limitation, risks from the activity itself, transportation to and from the activity, risks connected with my physical condition and required exertion, risks from improper usage of equipment, and actions of other participants or spectators. I acknowledge that I am responsible to provide my health or accident insurance. I acknowledge that I may be photographed, video-taped, and/or recorded and I waive my photographic rights to the Community College of Denver.

I hereby accept full responsibility for any damages that I may cause to the Community College of Denver equipment and/or my accommodations, and agree that I am responsible for compensating the Community College of Denver Community Education Department or other businesses the full amount. I also recognize that this is a college sponsored trip and I agree to abide by all college policies, as well as State and Federal laws on the trip/activity. This includes omitting the use of alcohol and illicit drugs, and not bringing or using any weapons. I am aware that if I choose NOT to abide by college rules and policies, I will be subject to the Community College of Denver disciplinary action as well as possible State or Federal charges. I further understand that I may be banned from future Community College of Denver Community Education courses, programs or activities.

I hereby consent to and authorize any use and reproduction by you, or anyone authorized by you, of any and all photographs/digital images/video tapes/recordings.

For myself, my heirs, successors, executors, I hereby knowingly and intentionally waive and release, indemnify and hold harmless the college, Community College of Denver (CCD), The State Board for Community College and Occupational Education, The State of Colorado, trustees, officers, employees, agents and volunteers from and against all claims, actions, causes of action, liabilities, suits, expenses and NEGLIGENCE of any kind of nature arising directly or indirectly out of any damage, loss, injury, paralysis or death in connection with my participation in this course, program or activity and/or use of this equipment and to waive all claims for damages or losses against the state, the Board or the college which may arise from such activities.

I, _____ (print name) HAVE CAREFULLY READ, CLEARLY UNDERSTAND, AND VOLUNTARILY SIGN THIS WAIVER, ASSUMPTION OF RISKS AND RELEASE AGREEMENT.

Student: _____
Signature Date

Parent/Guardian: _____
(if under 18) Print Name Signature Date

Emergency Contact Name: _____ Emergency Phone: _____
Print Name (xxx-xxx-xxxx)