



Informed Acknowledgement of and Consent to Field Trip Hazards and Risks

CCOC: _____ Location: _____
Activity/Event: _____ Dates Covered: _____
Participant Name: _____ Date of Birth: _____
Home Address: _____ Phone: _____
Student ID Number: _____ Allergies: _____

In Case of Emergency, Notify: Name: _____ Phone: _____
Relationship: _____

The undersigned participant (parents or legal guardian, if participant is under the age of eighteen (18)), hereby executes this Informed Acknowledgement of and Consent to Field Trip Hazards and Risks for themselves and their heirs, successors, representatives and assigns, and hereby agrees and represents the following:

I understand that, although the College will take steps to foster field trip safety, there are inherent risks in many activities and there are significant levels of personal responsibility that I must assume for myself. I am aware that during my voluntary participation in the above listed activity, certain dangers may occur, including but not limited to death, permanent paralysis, injuries, accidents, illness, and the hazards and forces of nature, all of which are potentially associated with student participation in the various physical and/or travel activities involved with this, or any other program related to this, activity/event.

Specifically: _____

I understand that I am not permitted to use, and I specifically agree and declare that I will not use or possess, alcohol or drugs on this or any other College-sponsored field activity. I certify that I am in good health and have no medical, physical, or emotional impairments, conditions or concerns that might inhibit my participation, or jeopardize my safety or the safety of others, while participating. I understand that neither the College nor any of its agents or instructors serves as guardians or insurers of my safety, and that the College does not provide special insurance for my protection.

In consideration of, and as part payment for, the right to participate in these activities and services arranged for me by the College, I have and do hereby assume all the above-described risks and any other risks associated with this field trip or the above-described activity/event.

I certify that I am of lawful age and am competent to sign this Informed Acknowledgement of and Consent to Field Trip Hazards and Risks. I, the undersigned, have read this Acknowledgement of and Consent to Trip Hazards and Risks and understand its terms and the risks involved and accept these risks. I understand and agree by my signature below that I have had the opportunity to discuss this document with anyone that I might choose and that I freely sign it.

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS ACKNOWLEDGEMENT BY READING IT BEFORE SIGNING. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT.

Signature of Student Date

Signature of Witness Date

Signature of Parent or Guardian Date