

STUDENT ACTIVITY RELEASE WAIVER



I, the undersigned student, acknowledge that I the "Activity") described as follows:	have agreed to participate in the Whittier College sponsored activity (hereby known as
	on
Activity Type (check one): class credit at	hletics internship club/org sponsored service/project
	HEALTH INFORMATION
Emergency Contact Name	Contact Number
Allergies	
Known Medical Conditions	
An ADR (American Driving Record) form m Name of Driver Cell phone number of driver or one person in (This cell phone must remain in the "ON" pos	vehicle
State	Number
VEHICLE INFORMATION (only to be fill	
Vehicle License Plate Number Make	
Year	
Passengers:	
2. I acknowledge that participating in the accould occur to me or others. I accept and result of my participation in the Activity, i	while driving vithout a sixty minute rest period
3. I understand that the behaviors NOT to Drinking of alcoholic beverages or use harassment of other students or people, d	lerated on this trip include but are not limited to: of any illegal substance (even for those who are 21 years of age or older), abuse o isorderly conduct, hazing (as defined in the Student Handbook), theft or damage to the on the trip, or any activity that would reflect poorly on Whittier College
In consideration of the College's efforts in agree to release, indemnify, hold harmless from any and all claims and causes of action property, personal injury or death sustain participation in the above named activity	iny injuries occurring while I am participating in this activity: In making this educational trip available and my being allowed to participate, I hereby as and forever discharge Whittier College, its trustees, officers, employees and agents from which might be brought by me or my parents or dependents on my behalf for loss of med by me arising out of any travel or activity conducted during the period of my I understand that this release covers liability claims and actions caused entirely or in College (or its trustees, employees, or agents), including, but not limited to negligence lege.
	s it incurs due to injury/damage resulting from my participation in this activity: any loss or costs, including medical bills, court costs and attorneys' fees, that it might om my participation in this activity.
personal representative, if I am deceased	y from suing Whittier College: bind the members of my family and spouse, if I am alive, and my heirs, assigns, and I. This Agreement shall be deemed as a release and consent not to sue regarding any ittier College relating to my participation in this activity.
regulations regarding student conduction understand that if I do not have a copy of	participating in a College-sponsored activity, I am bound by all College rules and et, including but not limited to the <i>Student Code of Rights and Responsibilities</i> . The <u>Student Handbook</u> , one is available for my review in the Dean of Student's Office
By voluntarily signing below, I acknow	VLEDGE THAT I HAVE READ AND UNDERSTAND THIS LEGALLY BINDING AGREEMENT.
Signature of Student (or guardian if under18)	Printed Name Date
Student ID#	Phone Number