

College of Southern Maryland

Student Activity Release From

Use for all off-campus curricular, co- and extracurricular activities. Activity supervisor and student should fill out form for each student for activities which span an entire semester or season, as for example, in the case of athletics or nursing. Use form also for the occasional off-campus activity, e.g. field trip.

I, _____, wish to participate in _____
NAME EVENT

in _____ planned for _____
CITY, STATE INCLUSIVE DATES

I voluntarily assume all risks of loss, damage, illness or injury which I may sustain while participating in this activity. I am particularly aware of the following dangers which are related to an activity of this kind.

Further, I will refrain from instituting, processing, or in any way aiding any claim, demand, action or course of action for damages, costs, expenses, or compensation against College of Southern Maryland and its officers, agents and employees for, on account of, or hereafter growing out of, any injury or loss which may occur during the event described above.

Additionally, I release College of Southern Maryland and its officers, agents and employees from any and all claims, demands, and causes of action resulting from any injury or loss which occur during my participation in the event described above, whether arising through the negligence, omission, default or other action of any person or organization associated with the event described above.

Date _____ Signature _____

Home Telephone _____ Email: _____

Please check one of the following

Under 18 years of age _____ 18 years or older _____

Please fill out below if you are under the age of 18

_____ Signature of Parent or legal guardian if student is under age 18.