







## Student Group Travel Release Form

### STATEMENT OF RESPONSIBILITY AND AUTHORIZATION WAIVER, RELEASE AND INDEMNIFICATION AGREEMENT

The undersigned hereby acknowledges that participation in a student travel program sponsored by the University of West Georgia and/or the University System of Georgia involves some risks including physical injury, illness, or loss of personal property. The undersigned hereby agrees that for the sole consideration of the University of West Georgia's and/or the University System of Georgia's allowing the undersigned to participate in student travel any related activities for which or in connection with which the University of West Georgia and the University System of Georgia have made available any equipment, facilities, grounds, or personnel for such programs or activities, the undersigned does hereby release and forever discharge the University of West Georgia and the Board of Regents of the University System of Georgia, its members individually, and its officers, agents and employees, from any and all claims, demands, rights and causes of action of whatever kind or nature, arising from and by reason of any and all known and unknown, foreseen and unforeseen bodily and personal injuries, including death, damages to property and the consequences thereof, resulting from my participation in or my being in any way connected with the University of West Georgia and/or the University System of Georgia and related activities.

I understand that the acceptance of this Release and Waiver of Liability by the University of West Georgia and the Board of Regents of the University System of Georgia shall not constitute a waiver in whole or in part of sovereign immunity by said Board, its members, officers, agents, and employees.

I hereby agree that I will maintain accident and health insurance for my individual protection and keep such insurance in force and effect for the entire duration of my participation in said program. I absolve the University of responsibility and all liability for any injuries, illnesses, claims, damages, charges, bills and/or expenses I may incur while I participate in student travel. I further certify that to the best of my knowledge, I am in good health and am physically capable of undertaking this travel. I agree to consult my physician concerning any limiting conditions or special precautions necessary to the protection of my health, and to inform the University of West Georgia of any limiting conditions or special precautions recommended by my physician.

I will comply with all University standards, rules, and policies for student behavior and agree that the University has the right to enforce such standards and policies and may impose sanctions for any behavior detrimental or incompatible with the interest or welfare of the University or program. The University reserves the right to decline to accept or retain me in the Program at any time should my actions or general behavior impede the operation of the Program or the rights or welfare of any person. Similarly, if my conduct violates any policy or procedure of the University, I understand that I may be required to leave the Program in the sole discretion of the University's agents and representatives, and may be referred to the appropriate University officials for further disciplinary or other action.

I agree that this Statement of Responsibility and Authorization; Waiver, Release and Indemnification Agreement, is to be construed under the laws of the State of Georgia, U.S.A.; and that if any portion hereof is held invalid, the balance hereof shall, notwithstanding, continue in full legal force and effect.

I have read the above statement carefully, understand its terms, and signed it knowingly and voluntarily. Furthermore, I understand that this Agreement shall be effective for a period of one year from this date.

\_\_\_\_\_  
Name (Type or Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

If student is under 18:

\_\_\_\_\_  
Parent or Guardian Name (Type or Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date