

Georgia Highlands College Student Activities Acknowledgement and Acceptance of Trip Policies and Participants Athletic or Recreational Activities of Risk and Insurance Certification
(read carefully before signing)

1. I acknowledge that I am solely responsible for any damages or costs arising out of any bodily injury or property damage sustained through my participation in recreational, club or course related activity. I accept responsibility for my own travel unless it is provided by the college.
2. If as a participant I am separated from the group and miss the transportation, I fully acknowledge and accept all responsibility for my own return transportation.
3. Alcoholic consumption is not allowed during this activity regardless of the age of the participant. Smoking in group vehicles is also prohibited.
4. Due to the type of programming and reservation system required we must adhere to a strict NO Refund policy. Only if a trip is cancelled or the participant finds a replacement is a refund possible. Contact the Office of Student Life to see if a trip waiting list is available. If a replacement is found it will be necessary for you to notify the Office of Student Life and arrange to do the necessary change in paperwork.
5. I acknowledge that a violation of any of the above, or any conduct during a trip or activity that violates any state, local, or federal laws as well as institutional or Board of Regents policy may cause me to be ejected from the activity and possibly subject me to additional disciplinary action upon returning to campus.

Many recreational activities and athletic programs involve substantial risks of bodily injury, property damage, and other dangers associated with participation in such activities. Each participant in such activities should realize that there are risks, hazards, and dangers inherent such activities and in the training, preparation for and travel to and from such activities. It is the sole responsibility of each participant to participate only in those activities for which she/he has the prerequisite skills, qualifications, preparations, and training. Please notify the Office of Student Life of any special housing or travel accommodations that need to be made.

The undersigned acknowledges that Georgia Highlands College does not warrant or guarantee in any respect the competency or mental or physical condition of any trip leader, vehicle driver, or individual participant in athletic or recreational activity. All participants in voluntary recreational activities and athletic programs are to be required to sign a Release, Waiver of Liability and Covenant Not Sue form.

I acknowledge that I am solely responsible for any hospital or other costs arising out of any bodily injury or property damage sustained through my participation in such voluntary activities. In this regard, I certify that I am covered by a 24-hour health and accident insurance policy for which I will personally retain the proper identification and/or certification while participating in this activity. I have read and understand this notice. I accept and assume all risks, hazards and dangers involved in any such activities in which I may elect to participate, including the training, preparation for and the travel to and from the site of such activities.

My signature indicates that I have read, understand, and agree to abide by the policies above.

Participant Signature

Date

Parent or Guardian if under 18

Emergency Contact/Relationship to Participant (include phone #)

Release, Waiver of Liability and Covenant Not to Sue

The undersigned hereby acknowledges that participation in the athletic programs and recreational activities involves an inherent risk of physical injury and assumes all such risks. The undersigned hereby agrees that for the sole consideration of Georgia Highlands College allowing the undersigned to participate in voluntary recreational or athletic activities and in connection there with, making available to the undersigned for his/her use while participating in such programs or activities, certain equipment, facilities, grounds, or personnel of the institution, the undersigned participant does hereby waive liability, release and forever discharge the Institution and the Board of Regents of the University System of Georgia, its members individually, and its officers, agents and employees of and from any and all claims, demands, rights, and causes of action of whatever kind of nature, arising out of all known and unknown, foreseen and unforeseen bodily and personal injuries, damage to property and the consequences thereof, including death, resulting from my voluntary participation in or in any way connected with such recreational programs and athletic activities.

I further covenant and agree that for the consideration stated above I will not sue the Institution, the Board of Regents of the University System of Georgia, its members individually, its officers, agents, or employees for any claim for damages arising or growing out of my voluntary participation in recreational programs or athletic activities.

I understand that the acceptance of this release, waiver of liability and covenant not to sue the Institution or the Board of Regents of the University System of Georgia or any agent or employee thereof, shall not constitute a waiver, in whole or in part, sovereign or official immunity by said Board, its members, officers, agents, and employees.

Further, I understand that this release, waiver of liability, and covenant not to sue shall be effective during the entire period of my enrollment or employment at the institution. I have received a copy of this document and I certify that I am ___ years of age and suffering from no legal disabilities and that I have read the above carefully before signing.

Participant Signature

Date

Emergency Contact/Relationship to Participant (include phone #)

If under 18 years

I am the participating student’s parent or legal guardian, and I am fully competent to sign this document. I execute this Release, Waiver of Liability and Covenant not to sue for full, adequate and complete consideration fully intending for myself, the participating student, and for the participating student’s family, estate, heirs, administrators, personal representatives and assigns to be bound.

Signature of Parent or Guardian

The signature of a Student Life Coordinator is required for all student travel prior to the first date of travel. Students are not authorized to travel on the behalf of Georgia Highlands College without this signature. A copy of this form will be maintained in the OSL.

Signature of Student Life Coordinator

Date