RELEASE FROM LIABILITY

To be signed by all participants who are 19 years of age or older. If Participant is under 19 years of age, Participant’s parent or guardian (hereafter “Guardian”) must sign this release. Participant/guardian must sign in the presence of one (1) witness.

TO THE UNIVERSITY OF SOUTH ALABAMA:

For participant: _____________________________

Participant/Guardian understands that Participant will travel to various locations in the Mobile area on January 19, 2015. The purpose of these trips, which are sponsored by CASLCE, is to participate in the USA Martin Luther King Day of Service. Participant/Guardian understands that travel will be by private vehicle, and the University of South Alabama has no responsibility for or over the travel involved with this event. Participant/Guardian understands that this event is voluntary and not required by CASLCE or the University of South Alabama.

In consideration of the University of South Alabama and CASLCE permitting the Participant the opportunity to participate in this event, Participant/Guardian, in full recognition and appreciation of any and all risks, hazards or dangers inherent in this event, including transportation to and from the various locations in Mobile, to which Participant may be exposed, does hereby agree to assume all of the risks and responsibilities surrounding participation in such event. Participant/Guardian understands that CASLCE and the University of South Alabama, its trustees, officers, agents, servants and employees assume and accept no liability for personal injury or loss of life or damage to personal property.

Further, Participant/Guardian, for him/herself and his/her heirs and personal representatives, does hereby defend, hold harmless and indemnify, release and forever discharge CASLCE and the University of South Alabama, its trustees, officers, agents, servants and employees from and against any and all claims, demands and actions or causes of action on account of or resulting from participation in the aforesaid event.

Participant/Guardian attests and verifies that participant has no physical limitations that would prevent safe participation in this event. Participant/Guardian understands that participant IS NOT covered by any University liability insurance.

Participant/Guardian acknowledges that University policy prohibits the possession or consumption of alcohol at any time during the event described above.

IN WITNESS WHEREOF, I have caused this release to be signed this _____ day of ______________________, 20__.

SIGNATURE OF PARTICIPANT (if 19 or over) OR
SIGNATURE OF WITNESS

PARENT/GUARDIAN (if Participant is under 19)

PRINTED NAME OF WITNESS

PRINTED NAME OF PARENT/GUARDIAN
(if Participant is under 19)