



Activity Release Form

Instructions: It is the responsibility of the organization to have the Activity Release Form completed by each MSU-West Plains student at the start of each academic school year. These forms must be submitted to the Office of Student Life and Development prior to the organizations first travel activity of academic school year. This form only needs to be filled out once per academic school year. It is recommended the organization retain a copy of this form for each participant.

Name: _____ M Number: _____

Semester: _____ Date of Birth: _____

Address: _____

Phone Number: _____ Email: _____

Emergency Contact: _____

Emergency Contact Phone Number: _____

I, the undersigned participant, being the age of 18 or above (or, if under the age of 18, having obtained the signature of my legal guardian on this form in addition to my own), desire to participate in activities with the organization listed above, which may include but not be limited to transportation and trips to and from West Plains and other places. I realize these activities are potentially hazardous. I should not engage in these activities unless I am alert and observant, which I represent myself to be. I assume any and all risks associated with these activities including, but not limited to falls, personal injury, collision with other persons, the effects of weather, including high heat and/or humidity, and motor vehicle transportation, all such risks being known and appreciated by me. I attest that I am sufficiently physically fit to participate in these activities.

I understand the possible risks of being permitted to participate in activities hosted by the organization named above. I, for myself and my personal representatives, heirs, and assigns, do hereby hold harmless and release, waive, discharge, and covenant not to sue the Board of Governors of Missouri State University. Furthermore, I release Missouri State University-West Plains, its Board members, officers, employees, volunteers, and agents (hereinafter collectively referred to as "Missouri State") from any and all claims or liability on account of injury, death, loss, harm, or damage to the person or property of the undersigned of any kind or nature

whatsoever arising out of, or in any way connected with the undersigned's participation in the activities (including, but not limited to, trips and transportation), even though the claim or liability may arise out of the negligence or carelessness on the part of Missouri State, or any third person, whether foreseen or unforeseen, known or unknown.

The undersigned hereby expressly agrees that this release and waiver is intended to be as broad and inclusive as permitted by the laws of the State of Missouri, and that if any portion hereof is held invalid, it is agreed that the balance, notwithstanding, continues in full legal force and effect.

The undersigned further states that he or she has carefully read the foregoing release and waiver of liability, knows the contents thereof, and has agreed to sign this release and waiver of liability as his or her own free act and deed.

I also declare that I will take all necessary and/or recommended precautions to ensure my own person against physical and/or mental injury and property loss or damage. This includes, but is not limited to, following printed or verbal instructions given by those in positions of authority or leadership

I further declare that I assume responsibility for my actions or behaviors that may conflict with accepted standards, University requirements for participants, common sense or the instructions I receive from activity leader(s) either before or during this activity.

I do hereby affirm that I am covered under my guardian's medical policy or otherwise have adequate medical insurance. I understand that the University does not maintain any insurance policy covering any circumstance arising from my participation in this activity or any event related to that participation. As such, I am aware that I should review my personal insurance coverage.

ADDENDUM: (If driving personal vehicle only)

I, the undersigned, do hereby affirm that I possess a valid Missouri state driver's license, and that my vehicle is insured to at least the minimum liability coverage required by the State of Missouri, and that I assume all responsibility for the operation of said vehicle as a result of said activity, and for any failure to maintain the insurance coverage stated above.

By my signature below, I understand and have read the above release and agree to provisions contained therein. I have also informed my emergency contact/guardian for this trip.

If the student is under the age of 18, both the student and legal guardian need to sign below.

Student Signature

Legal Guardian Signature

Date

I am 18 years of age or older. Please sign below.

Student Signature

Date