

RELEASE OF ALL CLAIMS FOR PERSONAL INJURY AND PROPERTY DAMAGE
STUDENT TRAVEL PARTICIPATION

I, _____, a student at Arkansas State University over the age of eighteen (18), have chosen
student name
to participate in student travel to _____
location(s)
on _____
date(s)

I AM AWARE that participating in travel carries the risk of personal injury, property damage, or other losses.

I HEREBY FULLY RELEASE AND DISCHARGE Arkansas State University and its officers, agents, and employees from any and all claims for personal injury, property damage, or other losses resulting from my participation in this travel.

I HEREBY ASSUME ALL RISK of personal injury, property damage, and other losses which may result from my participation in this travel.

I FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS Arkansas State University, its officers, agents, and employees from all claims, suits actions, injuries, damages, and losses sustained by me and arising out of, connected with, or in any way associated with my participation in this travel.

I HAVE FULLY READ AND UNDERSTAND THE FOREGOING.

STUDENT (print name) _____

STUDENT (signature) _____ DATE _____

Department _____

*Department Contact _____

Contact Phone Number _____

* *Attach form to appropriate travel request and submit to Travel Services PRIOR TO TRAVEL.*