

Texas State Technical College

FIELD TRIP RELEASE FORM (form maintained by trip leader/club sponsor)

Section 1 (To be completed by field trip leader/club sponsor)

Club/Class: _____

Field Trip Leader/Sponsor: _____

Trip Purpose: _____

Trip Location(s): _____

Field Trip Date(s): _____

Equipment/Supplies to be provided:

By Participant: _____

By Field Trip Leader: _____

Physical activities to be undertaken include: _____

Section 2

(To be completed by adult student field trip participant, or parent/guardian if participant is 17 years of age or younger)

I acknowledge that there are certain risks inherent in field trips. I acknowledge that all risks cannot be prevented and I assume those beyond the control of the college staff. I represent that I am physically able, with or without accommodation, to participate in this field trip and am able to use the equipment and/or supplies described above. *To request disability accommodations for this trip, please contact the disabled students office at least 10 days in advance of the trip.*

Should I require emergency medical treatment as a result of accident or illness arising during the field trip, I consent to such treatment. I acknowledge that the college does not provide health and accident insurance for field trip participants and I agree to be financially responsible for any medical bills incurred as a result of emergency medical treatment. I will notify the trip leader/club sponsor in writing if I have medical conditions about which emergency medical personnel should be informed.

By signing below, I acknowledge that I have read and understand the above release of liability.

If the participant is 17 years of age or younger, this release must be signed by a parent or legal guardian. Emancipated minors (students under 18 classified as independent by Title IV DOE regulations) are exempt from obtaining parent/guardian signature.

Print Name: _____

Signature: _____

Date: _____

Parent/Guardian Name: _____

Signature: _____

Date: _____