

Student Self-Transportation Agreement

Student's Full Name: _____

Group Trip Details: (travel dates, origin/destination, and purpose of trip):

Travel Details Requested: (dates, destination, and purpose for request):

Responsible Faculty/Staff Member:

Emergency Contact Name:

Emergency Contact Phone:

STUDENT PARTICIPANT ACKNOWLEDGEMENT

I understand that by signing this release, I am requesting special permission to travel in a vehicle or other mode of transportation not owned or provided by the College in relation to a College-sponsored event and therefore accept all liability associated with activities related thereto. These activities include but are not limited to transportation, sickness, and accidents. In the event I am involved in an accident while traveling in such a manner to/from a College-sponsored event, I understand that I am responsible for loss or damage to the vehicle(s) and any bodily injuries or property damage to myself or others that may be caused by or related to such an accident. I understand that Maryville College or its insurance agent, will not cover any of the costs for damage, liability, and medical costs to myself, passengers, or others involved in any accident. I understand that I am fully and exclusively responsible for my own behavior. I have and do hereby release and will hold harmless Maryville College and all its officers, directors, employees, students, and agents, from any and all liability, actions, causes of actions, debts, claims and demands of every kind and nature whatsoever, including attorney fees, and specifically including any claim for negligence or negligent acts, which I now have, or which may arise out of or in connection with participation in such activities. The terms hereof shall serve as a release, indemnification, and assumption of risk for my heirs, executors, and administrators and for all members of my family, including any minors accompanying me. If I am driving myself and/or others, I certify that I maintain appropriate insurance covering damage, liability, and medical costs for myself and any passengers that may be traveling with me. I agree to abide by the applicable sections of the College Vehicle Policy as well.

Student Participant's Signature: date:	
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PARENT/GUARDIAN ACKNOWLEDGEMENT (Required if you are under the age of 18)

I understand the above request and support the request. By supporting this request, I am stating that Maryville College will not in any way be responsible or liable for my student once he/she is granted this release.

Parent/Guardian Name: _____

Signature: ______ date: ______