

FIELD TRIP RELEASE FORM

This form must be completed prior to the field trip.

Date _____

Name of Student _____ Student ID# _____

Address _____

Telephone _____ Age _____

Sponsoring Organization/Class _____

Professor _____

Destination _____

Purpose of Trip _____

Depart: Date _____ Time _____ Place _____

Return: Date _____ Time _____ Place _____

Mode of Transportation: Bus Train Plane College Vehicle Personal Vehicle

In case of emergency contact: Name _____

Address _____

Home Phone _____ **Alternative Phone** _____

Relationship _____

In order to safeguard my own physical health and safety, and that of my fellow students, teachers, and guests, and to protect the good name and reputation of Kaskaskia College while on this trip, I shall:

1. Observe all public laws and ordinances, including traffic laws, good citizenship, decorum, and courtesy.
2. Observe all procedures, rules, and regulations of Kaskaskia College.
3. Observe all rules of the host institution, agency or facility, which apply to visitors or the general public.
4. I agree to discuss any existing health concerns with my advisor or professor that could impact my field trip participation.

I UNDERSTAND AND AGREE TO PARTICIPATE IN THE ABOVE TRIP AND HEREBY RELEASE KASKASKIA COLLEGE AND AGREE TO HOLD IT AND ITS OFFICERS, AGENTS, AND EMPLOYEES HARMLESS FROM ANY AND ALL LIABILITY ARISING OUT OF THE ABOVE TRIP.

Student's Signature

Parent's Signature (If participant is less than 18 years of age)

Copy 1—Faculty Member/Student Org. Advisor Original—Dean of Enrollment Services