



UMass

Dartmouth

STUDENT ACTIVITIES, INVOLVEMENT, & LEADERSHIP OFFICE

Assumption of Risk and Release (Field Trips and Off-Campus Activities)

This release is executed by _____ to the University of Massachusetts Dartmouth,
Participant Name

North Dartmouth, MA. In consideration of being permitted to participate in

_____ with _____,
Activity *Name of Organization*

I the undersigned, am in full recognition and in appreciation of the dangers and hazards inherent in this

activity and during transportation to and from North Dartmouth, MA and _____ on
Location

_____, 20_____.
Date of Activity

I hereby agree to assume all risks and responsibilities surrounding my participation in this activity or any activities undertaken as an adjunct thereto; and further do release, and forever discharge the University of Massachusetts Dartmouth and all its officers, agents, and employees from and against any and all claims, demands and actions or causes of action, on account of damage to personal property, or personal injury, or death, which may result from my participation, and which result from causes beyond the control of and without the fault of or negligence of the University of Massachusetts Dartmouth officers, agents, or employees, during my participation as aforesaid.

Further, I hereby certify that I have health and accident insurance with _____,
Company Name

policy number _____, effective date _____, which

will cover me in _____. In witness whereof, I have caused this release to
Location of Activity

be executed this _____ day of _____, 20_____, and I intend to be legally

bound hereby.

Student Signature

If under 18 years of age, Parent or Legal Guardian Signature

In case of emergency, please contact:

Name: _____ Relationship: _____

Phone #: _____ Address: _____

For Office Use Only:

This form will be kept on file in the SAIL Office

Ticket #: _____

Trip Sponsor: _____

Sold By: _____

Contact: _____