## Maryville University Assumption of Risk and Waiver For Student-Provided Transportation

I acknowledge that I will be solely responsible for my own transportation for travel to the Maryville University ("Maryville" or "University") activity described below ("Activity"), either because Maryville is not providing transportation or because it is, and I have chosen not to use the provided transportation.

Understanding that there are always hazards associated with travel, when I provide my own transportation, I will do so in a safe and responsible manner. I certify that I have a valid driver's license and carry the legal limits of automobile insurance.

I will assume all responsibility and risks related to or in any way connected with this trip and related activities, including the transportation of any other passenger(s) to and from the activity.

I expressly and knowingly covenant not to sue and I agree to release, indemnify, and hold harmless the University, its directors, agents, employees and/or volunteers from any claims, lawsuits and related expenses arising out of the transportation I provide.

I will comply with all the standards of conduct required by Maryville's policies, including the prohibition against possession or use of alcohol and drugs, and I understand that violations thereof may result in disciplinary action up to and including expulsion.

I understand that it is my responsibility to arrive on time at the designated location(s) for this activity.

Failure to comply with any of the above may result in disciplinary action.

Purpose of Trip(s): \_\_\_\_\_\_

Date(s) of Travel: \_\_\_\_\_\_

Course/Activity: \_\_\_\_\_

I have read and understand this document and agree that it will legally bind me, my heirs, and my estate. I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

Student Signature	Student Phone Number
Printed Student Name	Date
Emergency Contact Name	Emergency Contact Number

## *If Student is under 18 years of age:*

I am the parent or legal guardian of the student. I understand the legal consequences of signing this document, including (a) releasing the University, its directors, agents, employees and/or volunteers from all liability on my and the student's behalf, (b) promising not to sue on my or the student's behalf, (c) and assuming all risks of the student's travel to, from, and during the Activity. I allow student to provide student's own travel to this Activity. I understand that I am responsible for the obligations and acts of student as described in this document.

I have read and understand this document and agree that it will legally bind me, my heirs, and my estate. I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

Parent/Guardian Signature

Printed Parent/Guardian Name

Minor Student's Name

Date

Please return this form to: \_\_\_\_\_\_