



## Agreement and Release

WHEREAS, (Indicate Full Name) \_\_\_\_\_, hereinafter referred to as Student, is about to take a travel and study program described as the \_\_\_\_\_, and

WHEREAS, it is acknowledged that said travel and study program involves some risk to person and property, including but not limited to the risk of injury due to accident and disease; and

WHEREAS, it is acknowledged that said travel and study program may be the occasion of medical emergency necessitating the administration of medical treatment including hospitalization or surgery;

NOW, THEREFORE, in consideration of said student being permitted to participate in said travel and study program, I do hereby, for myself, my heirs, administrators, and executors, and the undersigned as parent, parents, or guardian of said Student, do for ourselves and for and on behalf of said Student, all acknowledge and assume the risk of such travel and study program, and do hereby release and forever discharge all entities hereinafter referred to as North Georgia College and State University and the Board of Regents of the University System of Georgia, and all of their officers, faculty, employees, volunteers, and agents whether accompanying said program or otherwise, from any and all claims, demands, actions, or causes of action, on account of any injury to me or my property, on account of my death, or on account of damages suffered by me for whatever reasons, which may occur from any cause, including negligence, or in connection with said travel and study program or any continuances thereof; and we do hereby expressly covenant and agree to refrain from bringing suit or proceedings at law or in equity or otherwise as provided by law, against any of said bodies or persons on account of any and all such claims, demands, actions, or causes of action. I voluntarily assume these risks. I have read and understand the program description. This document is executed with full knowledge of its signature.

***If my parents or guardian have not signed this form, I represent and certify that I am not a minor.***

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date