

Off-Campus Activity Release

Activity Information								
Curriculum/Program				Instructor				
Date		•		•				
Destination								
Contact person at destination			on					
Telephone number								
Transportation by								
Time of departure				Time of re	eturn			
Instructional Objective								
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			,					

Note: All students participating in this event should sign the release on the back of this page. Submit this completed form to your Dean/Director. The form will then be sent to the Vice President for Instruction and Student Services for approval. The completed form will be forwarded to the Vice President for Financial & Administrative Services and kept on file.

Authorization							
Dean/Director		Executive Vice President for Instruction & Student Services					

ACTIVITY RELEASE

to narti	I, the undersigned student at Southwestern Commur cipate in the activity of	-		-							
(barain	cipate in the activity of day of _ after designated "Activity"), on the day of _		20	and do horoby froaly							
and vol	untarily release Southwestern Community College fro		, ZU , and all liability, of any tyn	, and do hereby freely							
and voluntarily release Southwestern Community College from any and all liability, of any type or nature, for any injuries and/or loss which I may receive or sustain as a result of said Activity, including but not limited to, any injuries occurring											
	or resulting from travel to and from said Activity and p		•								
_	n the college van or a private vehicle to and from said			-							
_	s no responsibility or liability, directly or indirectly, fo		-	confirmatinty conege							
assume	I do further hold and save harmless, and agree to ind			nunity College from any							
and all	iability associated with said Activity which may result		•	namely conege from any							
ana an	IN WITNESS WHEREOF, I have hereunto set my hand										
20		una s	ear this the ady or _	<i>_</i>							
											
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