

**Release Agreement for Voluntary University Travel**

I am a student at The University of North Carolina at Greensboro (“UNCG”) and am enrolled in \_\_\_\_\_ (class/UNCG organization). I agree to participate in a voluntary educational field trip (“Trip”) to \_\_\_\_\_ (location) from \_\_\_\_\_ (day/date) through \_\_\_\_\_ (day/date). I understand the Trip may include participant transportation to/from \_\_\_\_\_ (location) in State-owned vehicles driven by UNCG employees, travel by foot/car/plane/subway/taxi at location, visit \_\_\_\_\_, and participate in \_\_\_\_\_ activities. Participating students will be accompanied by the following UNCG employees: \_\_\_\_\_, and will have overnight accommodations at \_\_\_\_\_.

I will attend and participate in all aspects of the Trip, and will remain on the premises of the \_\_\_\_\_ (accommodations) when not supervised during a Trip itinerary event. I agree to comply with all federal, state, and local laws and UNCG policies at all times. I understand and agree that the use of alcohol and/or illegal substances, disruptive, abusive or other inappropriate behavior during this Trip may result in legal and/or student conduct action. I also understand that UNCG reserves the right to terminate my participation in the Trip at any time should my actions or behavior, in UNCG’s sole discretion, be determined to impede or obstruct the Trip activities, be in violation of federal, state or local law, or be in violation of the UNCG Code of Student Conduct. I understand that UNCG reserves the right to change the Trip, including travel arrangements and itinerary locations, at any time and for any reason without notice. The State of North Carolina, UNCG, its employees or agents shall not be held liable for any losses or expenses I may sustain as a result of any changes in the Trip or in the event of my dismissal from participation.

I certify that I am fully capable of participating in the Trip without causing harm to myself or others. I acknowledge that I am solely responsible for my own safety, well being, and my actions as well as any injuries, property damage or loss during the Trip including, but not limited to, travel, Trip activity, overnight accommodations, or any activity in which I may engage outside the Trip itinerary. Despite UNCG’s best reasonable efforts, I understand that there are potential and unavoidable risks of injury or medical conditions associated with travel and participation in the Trip including, but not limited to, personal injury, theft of or damage to personal property, illness or death. I understand and have been informed that injuries commonly incurred in this Trip activity may include, but are not limited to, bruises, lacerations, and injuries to muscles, ligaments, tendons, and joints of the body, such as shoulder, arms, lower back, legs and ankles. I further understand and have been informed that medical conditions may include, but not limited to, abnormal blood pressure, fainting, dizziness, disorders of heart rhythm, and rare instances of heart attack, stroke, or death. I hereby acknowledge that I have been advised and understand that it is my sole responsibility to decline, decrease or cease participation in the event I am unable to participate due to lack of training, illness, injury or other medical condition. I understand that it is solely my responsibility to seek and receive medical evaluation and treatment for any symptoms that may arise during the course of participation in the Trip. I understand that UNCG will not provide accident or health insurance for any participants. Participants are strongly encouraged to acquire their own insurance in the event of injury, illness or damages, including car insurance if any participant travels in a personal, non-State vehicle. In the event of my incapacitation, I hereby authorize UNCG staff to provide consent on my behalf for any necessary emergency medical attention.

I represent that my participation in this activity is wholly voluntary, in spite of, and with full knowledge of, the potential risks. I further represent that my agreement to the provisions herein is wholly voluntary. I understand that I have the right to consult with an attorney of my choice prior to signing this Agreement. I hereby release, indemnify, forever discharge and hold harmless the State of North Carolina, the UNC Board of Governors, UNCG, its trustees, officers, employees and agents, and all successors of the above-names entities, from any claims, actions, causes of action, demands, rights, damages, costs, sums of money, accounts, covenants, contracts, promises, attorneys’ fees and all liabilities or obligations of any kind or nature whatsoever at law, in equity, or otherwise, which I may have including, but not limited to, medical care, travel or accommodation expenses, damages to property, personal injury, or death caused by, deriving from, or associated with my participation in the Trip. UNCG accepts responsibility for the tortious acts of its agents and employees to the extent permitted by the North Carolina Tort Claims Act and without waiving sovereign immunity.

I agree that, should any provision or aspect of this Agreement be found to be unenforceable, all remaining provisions will remain in full force and effect. I agree that this Agreement shall be interpreted and enforced under North Carolina law and any dispute shall be adjudicated in a court of competent jurisdiction in Guilford County, North Carolina. This Agreement represents my complete understanding regarding UNCG’s responsibility and liability for my participation in the Trip, supersedes any previous or contemporaneous understandings I may have had with UNCG, whether written or oral, and cannot be changed or amended in any way without the prior written consent of UNCG. I have read, understood and accepted the terms and conditions stated herein and acknowledge that this Agreement shall be effective and binding upon me, my heirs, assigns, personal representative, estate and all members of my family. I certify that I am at least 18 years of age (or have parent/guardian signature consent), have read this Agreement and fully understand that I may be giving up legal rights and/or remedies to which I may otherwise be entitled.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date