

## IVY TECH COMMUNITY COLLEGE OF INDIANA MANDATORY ACADEMIC FIELD TRIPS INFORMED CONSENT, RELEASE AND ASSUMPTION OF RISK

Printed Student Name	
Class Name and Number	
Semester / Year	
	are mandatory for completing the academic requirements of this class and I freely and its field trips ("Trip") to various locations as described in the class syllabus during
influenza and Covid, injury, deat ACTIVITIES. I agree to make s rules and practices that may be enstop and seek assistance if I do not my personal fitness level. I agree t use or do anything that would pose	ctivity is an acceptance of some risk of illness, including but not limited to MRSA h and/or financial loss. I ASSUME ALL RISKS RELATED TO THE TRIP ure that I know how to safely participate in any activities, and I agree to observe any aployed to minimize the risk of illness, injury, death, and/or financial loss. I agree to believe I can safely continue in any activity. I agree to limit my participation to reflect o wear or use proper protection or gear as dictated by the Activity. I will not wear or a hazard to myself or others, including using or ingesting any substance which could agree that if I do not act in accordance with this agreement I may not be permitted to
officers, employees, students, volutravel to or from the Trip/s in vehic	It that Ivy Tech Community College of Indiana ("Ivy Tech"), including its trustees, nteers, agents and assigns, disclaims any responsibility for students and others who cles not owned, leased, or rented by Ivy Tech, and I hereby assume all risks associated or being driven by others, to or from the Trip/s.
	in agent of, and has no responsibility for, any third party including without limitation any services including food, lodging, travel, or any equipment associated with the
	o responsibility for my own actions, behaviors, or conduct that may result in injury, ancial loss to others; or myself and that I will be held solely responsible for my own
unrestricted right to reproduce the publication, promotion, illustration, its legal representatives for all clair	on, I grant permission to Ivy Tech and its agents and employees the irrevocable and photographs and/or video images and/or interviews taken of me for the purpose of advertising, or trade, in any manner or in any medium. I hereby release Ivy Tech and ms and liability relating to said images and/or interviews. I will make no monetary or use of the photograph(s)/video and/or interviews.
MY SIGNATURE BELOW IND	ICATES THAT I HAVE READ AND UNDERSTAND THIS AGREEMENT.
Student Signature:	Date:
If the Participant is under 18 years and grants permission for participa	of age, the parent or guardian in consideration of this request accepts the above terms ation.
Signature of Parent/Legal Guardian:	Date:
Printed Name:	