

Risk Assessment and Release Form

I, _____, fully recognize that there are certain risks and responsibilities to which I may be exposed by participating in the following activity _____ during _____. Although designed to enhance my general education, participation in this trip and program is entirely voluntary and is not required as part of any academic program or course. The following is a description and list of examples of specific, significant, non-obvious dangers and risks associated with this activity. The dangers and risks listed are not exclusive and I realize that other significant risks and dangers may be present in the activity:

HEALTH INSURANCE, EMERGENCY INFORMATION, AND AUTHORIZATION

- I understand that I am responsible for providing my own health insurance.
- The following person should be contacted in case of emergency:

Name: _____
 Relationship: _____
 Address: _____
 Telephone: _____

- If I become injured or ill while participating in the program, I hereby authorize _____ to act on your behalf in obtaining medical treatment. I understand and agree that I am fully responsible for all expenses incurred for any medical care I receive during the program.

By signing this form, I acknowledge that I have been informed about certain risks and responsibilities involved in this program and that I am knowingly and voluntarily assuming them. By signing this form I also agree, for myself, my heirs and assigns, to release and hold harmless George Mason University, its employees and agents, from any legal claim or liability for any bodily injury and personal property damage that is caused to me by the negligent act or omission of third parties, arising from my activities under this agreement.

Signed: _____ Date: _____

If the participant is under 18 years of age, a parent or legal guardian must also sign:

Signed: _____ Date: _____