

Hold Harmless Agreement/Waiver of Liability for academic year 2009-2010

Club/Organization Name

In consideration of the sponsorship of the College of Saint Benedict /Saint John's University _____
by the Joint Club Board and the administration of the institution; Club/Organization Name

And in further consideration of my participation in _____, I _____,
Club/Organization Name Your Name

hereby release and hold harmless the College of Saint Benedict/Saint John's University, its directors, regents/trustees, agents, employees and the Saint Benedict Senate/Saint John's Senate for any personal injuries I may sustain as a result of my participation in activities of _____. This includes on- and off-campus activities, trips, practices, etc.
Club/Organization Name

I hereby agree to assume all risk of injury and loss that may arise as a result of participating in this activity and further agrees to hold: The College of St. Benedict, St. John's University, CSB/SJU Division of Student Development, Dept. of Student Activities and Leadership Development, _____, and/or its agents, harmless for any injury or loss
Club/Organization Name

that arises as a direct or indirect result of any act or omission of any third party.

I also understand that as a student of the College of Saint Benedict/Saint John's University, I must have adequate health insurance coverage, at my own expense.

NO ALCOHOL WILL BE ALLOWED ON THE BUS/VAN or other transportation to and from competitions. Only team members are allowed to ride in team-sponsored vehicles. All participants are responsible to follow institutional rules as set forth in the *Bennie Book* and *J-Book*. Any behavior that is considered disruptive by the trip leaders will result in the participant(s) not being able to continue the trip. NO REFUNDS OF TRIP FEES WILL BE MADE.

I agree to follow all College of Saint Benedict/Saint John's University policies and procedures, including but not limited to Joint Club Board policies, policies outlined in the *Bennie Book*, the *J-Book*, and the Co-Funding Board policies.

Student's Name

Signature

Date

Campus Address/Phone: _____

Emergency Contact Information:

Name: _____ Relationship: _____

Address/Phone: _____

Insurance Information (Carrier and Policy Number):

If student is under eighteen years of age, a parent or legal guardian must sign below.

As parent/legal guardian of _____, I hereby sign this Hold Harmless Agreement on behalf of my son/daughter/ward.

Parent/Legal Guardian signature

Date