

FIELD TRIP

LIABILITY WAIVER (ADULT)

Each adult participant, including group leaders and chaperones, must sign this form.

Assumption of Risk and Indemnity Agreement

Parish/School _____ Date of Activity/Field Trip _____

Description of Activity/Field Trip:

The undersigned person volunteers to serve as a chaperone for the above-described activity/field trip.

The undersigned, his/her personal representatives, heirs, assigns, DO HEREBY:

1. RELEASE, DISCHARGE AND COVENANT NOT TO SUE the above named parish/school and the Archdiocese of St. Paul/Minneapolis, MN for any and all claims and liability, except for those arising out of the strict liability or negligence of releasee which causes the undersigned injury, death or property damage and further agrees to hold releasee harmless and indemnify releasee from any claim, judgment or expense releasee may incur by participation in the described activity/field trip.
2. UNDERSTAND that participation in the described activity/field trip involves danger and risk of injury.

The inherent danger is understood and voluntarily assumed.

I HAVE READ THIS DOCUMENT. I UNDERSTAND IT IS A RELEASE OF ALL CLAIMS. I UNDERSTAND I ASSUME ALL RISK INHERENT IN THIS ACTIVITY. I VOLUNTARILY SIGN MY NAME EVIDENCING MY ACCEPTANCE OF THESE PROVISIONS.

Printed Name

Date Signed

Signature