

**Carleton College CANOE Trip  
RELEASE AND WAIVER FORM**

PLEASE READ CAREFULLY: This is a legal document that affects your legal rights.

INSURANCE COVERAGE

I understand that CANOE/Carleton College does not undertake to provide health, accident, disability, hospitalization, personal property, or other insurance to volunteer participants on CANOE trips.

PERSONAL CONDUCT

I understand it is important to the success of the present trip and the continuance of future programs that participants observe standards of conduct that would not compromise CANOE/Carleton in the eyes of the individuals and organizations with which it has dealings.

GENERAL RELEASE

I understand that CANOE/Carleton College reserves the right to make cancellations, changes or substitutions in cases of emergency or changed conditions or in the general interest of the trip.

It is further expressly agreed that all trips and use of any and all trip programs, vehicles, services or facilities shall be undertaken by me at my own sole risk. In consideration of being permitted to participate in the trip, the undersigned hereby represents and agrees as follows:

- I hereby, for myself, my personal representatives or anyone who might claim on my behalf, covenant not to sue, and I hereby release, waive and forever discharge CANOE/Carleton College, the trip leaders and all other organizations associated with the trip and all of their respective agents, employees, representatives, assigns or anyone acting for or on their behalf ("Releasees") from any and every claim, demand, action or cause of action, loss or liability of whatever kind or nature, either in law or in equity, arising from or by reason of any bodily injury or personal injuries known or unknown, death or property damage resulting from my participation in the trip or any activities in connection with the trip, whether caused by the negligence of Releasees or otherwise. I understand that trip leaders are not professional guides, and are not responsible for me, my safety, or my conduct on the trip.

- I hereby assume full responsibility for the risk of bodily injury, death or property damage due to my negligence or otherwise while in transit to or from or in or upon the area or location at which the trip will occur while participating in the trip. I further release Releasees from any claim whatsoever on account of first aid treatment or service rendered during my participation in the trip.

- I hereby agree that this Release and Waiver is intended to be as broad and inclusive as permitted by the laws of the State of Minnesota and that, if any portion thereof is held invalid, the balance shall continue in full legal force and effect.

Activity/Leaders \_\_\_\_\_

Location \_\_\_\_\_ Date \_\_\_\_\_

Student name (print) \_\_\_\_\_

Student's Signature \_\_\_\_\_

Date of Birth \* \_\_\_\_\_

\* If under 18 years of age, parent/guardian signature is required \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_

Relation \_\_\_\_\_ Phone \_\_\_\_\_