



Release and Waiver
Geology Field Camp – GEOS 414

Release executed on _____ (date) by _____ (name) for the benefit of the University of Arizona.

In consideration of my being permitted to become a participant in the University of Arizona Geology Field Camp course (hereinafter referred to as the “Field Camp”), I do hereby agree to release, indemnify, and forever discharge, the Field Camp, its officers, agents, and the University of Arizona, including its trustees, faculty, and staff, and other agents, of and against any and all liability and responsibility for any claim or cause or action on account of personal injury, accident, damage, or expenses, or other loss caused, suffered, or incurred by me or any other person(s) or entity during, arising out of, or in any way associated directly or indirectly with my participation in the Field Camp (including but not limited to travel incident to participation in the Field Camp), or for contribution or indemnification in respect to any claim made against me by any participant in this Field Camp or any other person or entity in connection therewith.

Additionally, I acknowledge that my participation in the Field Camp is entirely voluntary. I understand that my participation in the Field Camp is subject to any and all rules, procedures, and regulation outlined for me by the University of Arizona personnel or any other person(s) conducting the Field Camp and acknowledge that permission granted to me to participate in the Field Camp shall be revocable at any time, either before or during the Field Camp, if deemed by the University of Arizona or the officers and staff of the Field Camp to be in my best interest or in the best interests of other participants in the Field Camp.

I recognize that there are hazards and risks that may result in physical injuries or death. I have read the attached statement of Physical and Safety Requirements, and I understand that neither the University of Arizona nor the Field Camp officers, agents, or staff assumes any responsibility for the actions of, nor provides any insurance for, participants in the Field Camp, and assert that I voluntarily agree to assume all risks and hazards incident to this Field Camp. I authorize and empower the University of Arizona and/or any other person acting in a supervisory capacity with respect to the course, at any time and from time to time during the Field Camp, to take such action as is deemed by the University of Arizona or such person as necessary or desirable for my welfare if I am sick or disabled, including, without limitation, medical treatment and/or surgery, and that I will pay for any and all costs and expenses so incurred in the exercise of such discretion.

Further, I acknowledge that I have read and understand the above statements and that I am of legal age to bind myself to this release and waiver. This release and waiver has been executed on behalf of me, my heirs, and assigns, and has been made with full knowledge of possible risks involved. This instrument has been executed and shall be interpreted according to the laws of the State of Arizona.

Signature: _____

Date: _____

Witness

Signature: _____

Date: _____