**UNIVERSITY OF SOUTHERN MISSISSIPPI**

**Student Group Travel Release Form**

***Name of Event/Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Event Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Location of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

Name

Student ID# Cell Phone #

Emergency Contact:

 Name

 Relationship

 Phone Number (cell, work, etc)

Insurance Information:

 Insurance Company

 Insurance Policy #

Drug Allergies:

Please inform the University of Southern Mississippi personnel of any medical conditions that may not permit and/or hinder you from/while participating in this event. Provide additional information if possible.

I understand that attending this event is required / voluntary (circle). While on this trip, I agree to abide by the University of Southern Mississippi’s Student Code of Conduct. I certify that I have provided truthful information concerning my present medical condition. I have agreed to give my medical information with the understanding that it will be kept confidential and only released in a medical emergency.

In consideration of being permitted to participate in this event, I agree on behalf of myself, my family, heirs, successors, assigns and personal representatives, to assume all of the risks, dangers, hazards, and responsibilities surrounding my participation in the event, the transportation, and any independent activities arising out of my participation in the event, the same as if I was traveling alone.

To the maximum extent permitted by law, I, on behalf of myself, my family, heirs, successors, assigns and personal representatives, hereby release, forever discharge, and covenant not to sue the University of Southern Mississippi (University), its governing board, officers, employees, agents, and representatives (in their official and individual capacities) from any and all liability whatsoever, which may arise as a result of negligence on the part of the University, and from and against any and all liability for any harm, injury, damage, claims, demands, actions, causes of action, costs, and expenses of any nature (including attorney fees) that I may have or that may hereafter accrue to me, arising out of or related to any loss, damage, or injury, including but not limited to, suffering and death, that may be sustained by me or by any property belonging to me, which arise out of, result from, occur during, or are connected in any manner with my participation in this event, any related or independent travel, any activities, or field trips, regardless of whether they are sponsored, supervised or controlled by the University, and regardless of whether such liability or damages arise as a result of negligence on the part of the University, its governing board, officers, employees, agents, and representatives (in their official and individual capacities).

I, on behalf of myself, my family, heirs, successors, assigns and personal representatives, hereby agree to indemnify, defend and hold harmless the University and its governing board, officers, employees, agents, and representatives (in their official and individual capacities) from any and all liability for any harm, injury, damage, claims, demands, actions, causes of action, costs, and expenses, including attorneys fees, that may result from, arise out of, occur during, or are in any way connected with my participation in this event, any related or independent travel, any activities or field trips, regardless of whether they are sponsored, supervised or controlled by the University.

Student Signature Witness

Date Date