

# Student Travel Information & Roster Form

Please print all information, except where signatures are required.

Organization: \_\_\_\_\_ Trip Leader: \_\_\_\_\_

Advisor: \_\_\_\_\_ Advisor Signature: \_\_\_\_\_

Destination: \_\_\_\_\_  
City State

Dates of Travel: \_\_\_\_\_

Conference Center/Hotel/Site: \_\_\_\_\_  
Name of Site

\_\_\_\_\_ Phone Number

\_\_\_\_\_ Cell - Phone Number with vehicle

Please read the Release and Assumption of Risk/Student Driver Statement of Responsibility on the backside of this form **BEFORE** you sign the form..

|    | Participant Name | Participant Signature | Current Phone # | Identification Number |
|----|------------------|-----------------------|-----------------|-----------------------|
| 1  |                  |                       |                 |                       |
| 2  |                  |                       |                 |                       |
| 3  |                  |                       |                 |                       |
| 4  |                  |                       |                 |                       |
| 5  |                  |                       |                 |                       |
| 6  |                  |                       |                 |                       |
| 7  |                  |                       |                 |                       |
| 8  |                  |                       |                 |                       |
| 9  |                  |                       |                 |                       |
| 10 |                  |                       |                 |                       |
| 11 |                  |                       |                 |                       |
| 12 |                  |                       |                 |                       |
| 13 |                  |                       |                 |                       |
| 14 |                  |                       |                 |                       |
| 15 |                  |                       |                 |                       |
| 16 |                  |                       |                 |                       |
| 17 |                  |                       |                 |                       |
| 18 |                  |                       |                 |                       |

## **RELEASE AND ASSUMPTION OF RISK**

I, a student enrolled at The University of Maine, being of legal age agree as follows:

1. That I voluntarily agree to participate in the activity as stated on the attached form, and in consideration of being permitted to participate in this activity, do voluntarily execute this "Release and Assumption of Risk" on behalf of myself, my heirs and next-of-kin, my personal representatives, and my estate.
2. I acknowledge that I have been fully informed of the nature, scope and demands of this activity, and I understand that this activity may include other similar activities that may be dangerous to me.
3. I accept and assume full responsibility for all harm and injury, of every nature, including death, which may occur to me or which I may suffer, and for all damages or loss to any personal property owned by me while I am participating in this activity and, in furtherance thereof, I agree to indemnify and hold harmless the University of Maine System, its Trustees, faculty, employees and agents from and against any and all claims, demands, actions or causes of action, on account of damage to my personal property or may personal injury, or death, which may occur or result directly or indirectly from my participation in this activity, and which are not the result of the negligent act or omission of the University of Maine System, its Trustees, faculty, employees and agents.
4. I understand that it is not the purpose of this activity or the responsibility of the University of Maine System that safety rules and regulations are taught but only that reasonable safety standards be adhered to and agreed to by all participants. I acknowledge that the University of Maine System does not serve as guardian of students' safety and its faculty, employees and agents will not be responsible for administering any required first aid, treatment or medication to me.
5. I declare that I am able to physically withstand and cope with the indicated rigors of this activity with or without any accommodation. If an accommodation is needed, I will be responsible for any accommodations I may need.
6. I request that this "Release and Assumption of Risk" be construed and interpreted pursuant to the laws of the State of Maine, and if any portion thereof is held invalid, I request the remainder continue in full force and effect.
7. I understand that I am responsible for obtaining my own health, accident and life insurance coverages, and that the University provides no such coverages for me.

I declare that I completely understand and have fully informed myself of the terms and conditions of the "Release and Assumption of Risk" by having read it; or having it read to me, before signing.

## **STUDENT DRIVER STATEMENT OF RESPONSIBILITY**

Driving a University vehicle with University students or other campus personnel is a responsibility that should be carefully weighed. The driver is in charge of and responsible for the safety of the people in the vehicle. Drivers are expected to drive directly to and from their destination. The driver must not permit any unauthorized person to drive the vehicle. Alcohol is not permitted in the vehicle. The driver is responsible for obeying all traffic laws. The vehicle should be operated within the law and in a reasonable, prudent and responsible manner.

My signature on the front of this form reflects that I have read the above, as well as the Umaine Motor Pool policies, and am aware of my responsibilities.