

TRAVEL ACKNOWLEDGEMENT/WAIVER FORM

For Hawkeye Community College Club and Organization Related Travel

Hawkeye Community College ("the College") sponsors club and organization special events for students as a means of providing a comprehensive and diverse learning environment. Participants and leaders of these events are expected to conduct themselves in a professional and positive manner as representatives of the College. All students are responsible for knowing and must adhere to the Student Handbook and Clubs and Organizations Policies and Procedures Manual. Failure to follow operating guidelines, instructor/staff/ directives, and the respective handbooks may result in disciplinary action.

IRAVEL:		
Trip Director:		_
Club/Organization:		
		_
Date(s) of Travel:		_
l,	, am 18 years of age or older, am	a high school
graduate, am enrolled as a full-	or part-time student at Hawkeye Community Coll	lege during the
current academic semester in ac	ccordance with the College's policies and procedu	ares, and wish
to participate travel in a group c	or independently, off of the College's campus, in o	connection
with club or organization events	s ("the Event"). In consideration of being allowed	to participate
in the Event, I knowingly and vo	oluntarily:	

- acknowledge and understand that my participation in the Event is entirely voluntary;
- acknowledge that participation in trip activities could involve risk of physical injury, illness, death or property loss;
- acknowledge that despite safety precautions, the College cannot guarantee my safety.
 The College is not legally responsible for my personal safety or the safety of my property during the Event, nor does it provide health and accident insurance for trip participants;
- acknowledge that the College personnel or agents attending the Event are not necessarily medically trained to care for any physical or medical problems of individuals participating in the Event;
- represent that I have adequate health and hospitalization insurance for any injuries that
 I may receive as a result of my participation in the Event;
- agree to follow all the safety procedures and instructions of the Event coordinators (e.g., appropriate dress, proper use of safety equipment, etc.);
- understand that any medical expenses, property loss, or other personal expenditures that result during or from this travel/trip are to be borne by me, the student;
- acknowledge that if I drive my own vehicle or am a passenger in another's private vehicle, the College's auto insurance does not cover such private vehicle. I also
- understand that the College cannot be responsible for assuring the safety and reliability
 of such private transportation or driver, nor for any non-sponsored activities and travel

that I choose to participate in before, during or after the college sponsored function. I therefore accept the risks and responsibilities associated with such private vehicle travel and activities.

I hereby consent and give authorization to trip leaders to secure any emergency medical treatment in the event I am unable to, and I agree to be responsible for the costs thereof.

On behalf of myself and my heirs and assigns, I knowingly and voluntarily assume all risks associated with the Event and release the College, its trustees, officers, employees and agents (collectively "the Parties") from any and all responsibility or liability for personal injury, emotional injury, death or property damage sustained by me during or because of my participation in the Event. I agree, for myself, my administrators, personal representatives, executors, predecessors, successors, agents, heirs and assigns to release and hold harmless the Parties from any present or future claim and demands arising from participation in said Event, including but not limited to claims for personal injury, emotional injury, death or property damage arising directly or indirectly from my participation in the Event.

I UNDERSTAND AND AGREE THAT BY SIGNING THIS FORM I WILL WAIVE AND FOREVER RELINQUISH ANY AND ALL CLAIMS THAT I MAY HAVE, WHETHER KNOWN OR UNKNOWN, AND WHETHER ANTICIPATED OR UNANTICIPATED, AGAINST THE PARTIES ARISING OUT OF MY PARTICIPATION IN THE EVENT.

Printed Name:	 	
Student Signature:	 	
Date:		

Hawkeye Community College does not discriminate on the basis of sex; race; age; color; creed; national origin; religion; disability; sexual orientation; gender identity; genetic information; political affiliation; or actual or potential parental, family, or marital status in its programs, activities, or employment practices. Veteran status is also included to the extent covered by law. Any person alleging a violation of equity regulations shall have the right to file a formal complaint. Inquiries concerning application of this statement should be addressed to: Equity Coordinator and Title IX Coordinator for employees, 319-296-4405; or Title IX Coordinator for students, 319-296-4448; Hawkeye Community College, 1501 East Orange Road, P.O. Box 8015, Waterloo, Iowa 50704-8015; or mailequity-titleIX@hawkeyecollege.edu, or the Director of the Office for Civil Rights, U.S. Department of Education, Citigroup Center, 500 W. Madison, Suite 1475, Chicago, IL 60661, phone number 312-730-1560, fax 312-730-1576, email: OCR.Chicago@ed.gov.