AGREEMENT AND RELEASE FROM LIABILITY FOR OFF-CAMPUS SITE VISIT (FOR EVENTS NOT SPONSORED OR SUPERVISED BY USC)

It is the understanding of the University of Southern California that you plan an off-campus trip to ______ on ____ (the "Program") and have made your own transportation arrangements. You acknowledge and understand that this is not an event sponsored or supervised by USC and that you have made independent travel and itinerary plans. It is, therefore, understood that you accept full responsibility for travel arrangements, the associated costs, the activities you participate in, and that, as set forth below, the University of Southern California is not responsible for any injury or damage which may arise out of your participation in the Program or these activities.

Please affirm your understanding by reading and signing the statements below:

I understand that this Program is not mandatory, and my participation is purely voluntary. I recognize that participation in the Program has inherent risks of injury and agree to accept and assume any and all risks associated with participation in the Program.

As consideration for being permitted by the University of Southern California to participate in these activities, I agree that the University of Southern California ("USC") and its officers, trustees, employees, agents, representatives, and any department, organization or group affiliated therewith (collectively "USC Releasees") assume no responsibility for any injury or damage arising out of, or in part caused by, my participation in the Program, either while in transit to or from or at the Program locations. I further agree that I, my spouse, assignees, heirs, guardians, and legal representatives hereby voluntarily indemnify, release from liability, agree to defend and hold harmless the University Releasees for any accident, injury, illness, death, loss, theft, damage to person or property, or other consequences arising or resulting directly or indirectly from my participation in the Program, including while travelling to or from Program locations, and including but not limited to claims arising from or related to USC's negligence and/or products liability, including strict products liability.

In the event that I am injured, I agree to assume any financial obligation, either through my personal health insurance, or through some other means, for any medical costs which I incur. The USC Releasees assume no responsibility for any medical expenses, injury, or damage suffered by me in connection with the Program.

IT IS MY INTENTION BY SIGNING BELOW TO EXPRESSLY ASSUME ALL RISK OF PERSONAL INJURY, DEATH, OR PROPERTY DAMAGE UPON MYSELF, TO THE EXCLUSION OF THE USC RELEASEES, AND TO EXEMPT AND RELIEVE THE USC RELEASEES FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH.

By signing this agreement, I waive my right to bring any legal action now or at any time in the future to recover compensation or obtain any other remedy for any injury to myself or my property or for my death, however caused, arising out of my participation in the Program. I further agree that I, my spouse, assignees, heirs, guardians, and legal representatives will not make any claim against, sue or attach the property of the USC Releasees for any loss or damage resulting from my participation in the Program. I am aware of the potential dangers incidental to my participation in the Program, that this is a release of liability, a waiver of my legal right to collect damages in the event of injury, death or property damage, and a contract between USC and me, and I sign it of my own free will.

I expressly agree that this release is intended to be as broad and inclusive as the State of California will allow and that if any portion is held invalid, I agree that the balance shall, notwithstanding, continue in full legal force and effect.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE UNIVERSITY OF SOUTHERN CALIFORNIA AND/OR ITS AFFILIATED ORGANIZATIONS AND SIGN IT OF MY OWN FREE WILL. I ALSO VERIFY THAT I AM EITHER OF LEGAL AGE AND ABLE TO SIGN THIS RELEASE ON MY OWN BEHALF OR I AM UNDER THE LEGAL AGE OF 18 AND HAVE OBTAINED PARENTAL OR GUARDIAN PERMISSION TO PARTICIPATE IN PROGRAM.

Name (please print)	Date
Signature	
Signature of Parent or Guardian (if participant is u	ınder 18 years of age)
	Date

University of Southern California Student Organization Travel Form

Name of Organization	
Purpose of Trip	
Destination	
Type of Transportation	
Number of Trip Participants (please attach a list of participants)	
Travel Dates	
Departure	
Return	
Hotel/Lodging Information	
Name	
Address	
Phone Number	
Emergency Information (person on the trip that should be contacted first)	
Name	
Cell Phone Number	
Person in Los Angeles that can be contacted in the case of an emergency (advisor, fri	iend)
Name	
Phone Number	

Travel Suggestions

- Give this form with the list of participants to at least two people remaining in Los Angeles. You may even return it to Topping Student Center.
- ♦ Have a list of at least three names and numbers of people in Los Angeles that you can contact in the case of an emergency while you are gone.
- ♦ Have all participants complete a liability waiver.
- Complete and turn in a request for general liability insurance coverage.

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