

AGREEMENT, CONSENT, WAIVER AND LIABILITY RELEASE

----READ CAREFULLY BEFORE SIGNING----

I, _____, represent that I am eighteen years of age or older and in consideration for being permitted to voluntarily participate in, and receive the educational benefits of, the trip organized by Western Michigan University to _____ (Place) to _____ (“Program”) on _____ (Date), understand and agree as follows:

I fully understand and appreciate the dangers, hazards, and risks inherent in Program and that these dangers, hazards, and risks that include but are not limited to such activities as automobile travel, contact with unknown persons, and weather related concerns, all of which could result in personal injury, property damage, and death

In consideration of me being allowed to participate in Program and the related activities, to the fullest extent permitted by law, I hereby release, relieve, discharge, and hold harmless and shall indemnify Western Michigan University, its trustees, officers, employees, and agents from any and all liability or claims of liability, whether for personal injury, property damage, death, or otherwise, arising out of or in connection with my participation in Program or any travel associated with it. I further release, relieve, discharge, and hold harmless and shall indemnify any owners or drivers of private vehicles in which I am a voluntary passenger from any and all liability or claims of liability, whether for personal injury, property damage, death, or otherwise, arising out of or in connection with my participation in Program or any travel associated with it. I also warrant and agree that I shall not drive or operate any other motor vehicle, unless I am in possession of a valid driver’s license and have valid automobile insurance as required by Michigan law.

I also consent to being taken to an appropriate facility for medical treatment in the event of an emergency, and consent to emergency medical treatment being administered to myself in the event I am unable to authorize such treatment myself. I assume full responsibility and risk, including financial responsibility, for any and all losses, injuries or damages, including medical expenses, which I may sustain when participating in any Program activity.

It is my express intent that this Agreement, Consent, Waiver, and Liability Release shall bind the members of my family and my spouse, if I am alive, and my heirs, assigns and personal representatives, if I am deceased, and shall be governed by the laws of the State of Michigan.

I further acknowledge and agree that if I violate any Program rules and regulations I will be subject to dismissal from the Program and all remaining activities. I also understand that if the infraction constitutes a potential violation of the law, the appropriate authorities will be notified.

**I HAVE READ AND UNDERSTAND THIS ENTIRE AGREEMENT,
CONSENT, WAIVER, AND LIABILITY RELEASE, AND VOLUNTARILY AGREE TO ITS
TERMS AND CONDITIONS.**

Signature _____ Date _____

Printed Name _____ Telephone # _____

Please read this information carefully:

I, _____, do hereby acknowledge that I have agreed to attend this class trip organized by Western Michigan University, School of Music to _____(Place) to _____("Program") on _____ (Date), understand and agree that if I cannot attend this trip, written notification must be given to the faculty responsible for organization of the trip. Students who cancel their participation past the deadline date for this event which is _____ (month) _____ (day), _____ (year) may incur a financial penalty charged to their WMU account. These costs can include your individual transportation costs (air fare, bus, etc.), registration, admission fees, or any other costs associated directly to me.

I have read this agreement before signing it, understand it, and agree to all its terms.

Signature of Student: _____

Printed Name Student: _____

Address: _____

City, State, Zip _____

Contact Phone No. _____

WIN : _____