

**NORTHERN KENTUCKY UNIVERSITY
WAIVER AND RELEASE OF LIABILITY**

I hereby certify that I am the parent or legal guardian of _____, and that he/she has my permission to go on the trip to the (Place of field trip) on (Date _____ from (Time) _____ to (Time) _____.

In case of an emergency, Northern Kentucky University (NKU) may reach me at _____, or by telephone at _____, or another parent/guardian or responsible adult whose name is _____, at phone # _____, and whose relationship to the minor is _____.

I understand that there will be activities required of the participants in the above-related trip and there is some risk involved in all such activities. I hereby accept that risk on behalf of my son/daughter and certify that I know of no medical reason to limit such activity.

I understand that NKU is providing transportation by University vehicle and that (person sponsoring trip, of (your department)) will be accompanying the participant and will be the primary driver.

If medical care is required while on the trip, I authorize NKU through its employees or agents to contact Dr. _____ at phone # _____, or if that is not possible, I authorize NKU through its employees or agents to take my son/daughter to the nearest medical facility for purposes of receiving medical care with the understanding that I will not hold NKU, or its employees, agents or representatives responsible for the actions of the agents, representatives or employees of the medical facility and that I will assume any and all responsibility for payment of same. My medical insurance carrier is _____ and the policy number is _____.

On behalf of myself and my minor son/daughter, _____ I hereby release NKU and its officers, agents, employees, successors, and assigns from any and all liability arising out of or in any way related to this trip.

Date: _____ Parent/Guardian _____.

Participant _____.