

**DAVIDSON COLLEGE BIOLOGY DEPARTMENT
FIELD ACTIVITY AGREEMENT
ASSUMPTION OF RISK, RELEASE OF LIABILITY AND HOLD HARMLESS AGREEMENT**

Course number and/or Field activity(ies): _____

Date(s) of field activity: _____

THIS IS A LEGAL DOCUMENT. READ IT CAREFULLY BEFORE SIGNING.

1. I understand and accept that the Davidson Biology Department activity noted above exposes me to many risks and dangers. Some of the risks, which may be present or occur include, but are not limited to:

- hazards of physical exertion associated with the activity.
- hiking in rugged wilderness terrain, far removed from the comforts and conveniences of civilization, like medical treatment, transportation, and communication.
- trail hazards that make hiking difficult, including steep slopes, rocks and limbs in and over the trail, slippery rocks and footing, and holes and declivities;
- using tools and gear such as, laboratory utensils, kitchen utensils, knives, power tools, trapping devices, marking and measuring devices, and camping equipment;
- chemical hazards associated with trapping, killing and preserving specimens;
- carrying a backpack and other equipment;
- injuries inflicted by animals, insects, reptiles and plants;
- the forces of nature including lightning, weather changes, hypothermia, hyperthermia, sunburn, high winds, blizzards, avalanches and others not named;
- water hazards including swimming, wading, snorkeling, scuba diving, capsized boat;
- traveling in a vehicle not driven by me.

2. I understand and accept that these risks expose me to, but are not limited to, the following consequences: death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to my musculoskeletal system and serious injury to other aspects of my general health and well being. I also understand that the risks in participating in the field activity include not only the foregoing physical injuries, but also impairment of my future abilities to earn a living, to engage in business, social and recreational activities, and generally to enjoy life.

3. Understanding the risks mentioned above, and understanding that this activity may subject me to rigorous physical exertion, I hereby state that I am physically fit to participate in this activity.

4. IN CONSIDERATION OF MY BEING PERMITTED TO PARTICIPATE IN THE FIELD ACTIVITY, AND AS A CONDITION OF THE RIGHT TO PARTICIPATE IN THE FIELD ACTIVITY, I PERSONALLY ASSUME ALL RISKS INCIDENT TO SUCH ACTIVITIES. I ALSO WAIVE, RELEASE AND FOREVER DISCHARGE DAVIDSON COLLEGE AND ANY OF ITS EMPLOYEES OR AGENTS FROM ALL LIABILITIES, LOSSES, DAMAGES OR COSTS OF ANY NATURE THAT MAY ARISE IN CONNECTION WITH MY TRAVEL TO OR PARTICIPATION IN SUCH ACTIVITIES (INCLUDING RESCUE ACTIVITIES ASSOCIATED WITH THE PROGRAMS). I HEREBY AGREE NOT TO FILE SUIT AGAINST DAVIDSON COLLEGE OR ANY OF ITS EMPLOYEES. I AGREE TO INDEMNIFY AND HOLD THE COLLEGE AND EMPLOYEES HARMLESS FROM ALL LIABILITIES, LOSSES, DAMAGES OR COSTS OF ANY NATURE THAT MAY ARISE IN CONNECTION WITH MY TRAVEL TO OR PARTICIPATION IN SUCH ACTIVITIES, INCLUDING RESCUE ACTIVITIES. THE TERMS OF THIS DOCUMENT SHALL BIND ME, MY HEIRS AND PERSONAL REPRESENTATIVES.

_____ Tear here and retain top portion for your records. Hand the part below to your instructor _____

5. Prior to signing this document, I have had an adequate opportunity to read and understand it, have had an opportunity to ask questions about it, and any questions I have had have been answered to my satisfaction. I further state that I am ___ years old and competent to sign this document.

Printed Name Date Signature

Signature of minor participant's parent or legal guardian Printed name Date