

## Student and Non-Employee Travel Release and Waiver

In exchange for being allowed to participate in the Travel Activity identified below, I warrant and represent that I have no disability, impairment, or ailment preventing me from engaging in Travel Activities or that would be detrimental or adverse to my health, safety, or physical condition. If I am a Student and it is applicable, I have consulted with GGC Disability Services prior to determining if I can participate in this activity. I am aware of my medical history and have been advised to consult with a physician prior to engaging in this activity.

I understand and acknowledge that serious accidents sometimes occur during activities such as this, and that some medical conditions may be exacerbated or aggravated, and that participants occasionally sustain mortal or serious personal injuries and/or property damage as a consequence thereof, and that my participation could result in loss of or damage to my property, serious injury to my body or to others, and/or my death. I have been advised to obtain personal medical coverage. Furthermore, I agree to use my personal insurance as a primary medical coverage if an accident or injury occurs. I have been informed of the risks and know the safety procedures to follow that are inherent in this travel activity. I have been told how to handle potentially dangerous situations and know the emergency procedures to follow during this travel activity.

In exchange for my participation in this activity, I will indemnify, defend, and hold harmless GGC, the Board of Regents of the University System of Georgia, and the State of Georgia from and against any and all losses, claims, damages, liabilities, costs, and expenses (including, without limitation, reasonable attorney's fees and costs) from all liability resulting from my participation. Further, I agree to indemnify each and every one of them for liability arising solely from my tortious acts or omissions, and assume the risks associated with traveling.

I also hereby give permission to Georgia Gwinnett College to use my name and photographic likeness in all forms and media for advertising, trade, and any other lawful purposes.

This Release and Waiver shall be governed and construed in accordance with the laws of the United States and with the laws of the State of Georgia applicable to contracts entered into and to be performed entirely therein without regard to any choice of law or conflicts of law provisions. The parties voluntarily submit to personal and exclusive jurisdiction in any action brought in any court, Federal or State, within the County of Fulton, State of Georgia. I have read and agree to this Release and Waiver.

### Travel Activity

Description of Travel Activity:

Location(s):

Date(s):

**I certify that I have read this release and waiver and agree to its terms:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_