RELEASE FOR OUT-OF-CLASS ACTIVITIES AND PERMISSION FOR EMERGENCY CARE

In order to participate in full-time programs conducted by the University, you must read and sign below. **IF YOU ARE LESS THAN 18 YEARS OLD, IT MUST ALSO BE SIGNED BY YOUR PARENT(S) OR LEGAL GUARDIAN.**

Field Trip Release

I am aware that while participating in field trips, off-campus residential programs, and other out-of-class activities under the auspices of California Lutheran University, certain risks and dangers may occur that include, but are not limited to: accident or illness, forces of nature, etc., when traveling by automobile, bus or other conveyance.

In consideration of the right to participate in such out-of-class activities arranged by the Multicultural and International Programs Office, I do hereby assume all the above risks and will hold California Lutheran University, and their officers and employees, harmless from all liability which may arise in connection with my participation in the activities arranged by the Multicultural and International Programs Office.

Permission for Emergency Care

In case of illness/injury, permission is granted to treat the student named below.

Name (Print clearly) ____________________________

Signature________________________   Date____/____/____

Parent's/Guardian's Signature (if student is under 18):
________________________   Date_____/_____/_____

Person to contact in case of emergency
(U.S. contact preferred; if no U.S. contact, then put contact in home country):

Name   ______________________________

Phone   ______________________________

Fax    ______________________________