

Carl Sandburg College Trip Application and Waiver

PLEASE PRINT

Personal Information

First name	Middle i	nitial
City	County	State, ZIP
Cell phone number (if applicable) Email address		
ntil/		
City	County	State, ZIP
Birth date	CSC ID (if ap	plicable)
efore departure.		
disciplinary probation, or are charges currently p	pending?	Yes 🖵 No
	City Cell phone number (if applicable) ntil/ City Birth date efore departure. disciplinary probation, or are charges currently parts of the content of the	City County Cell phone number (if applicable) Email address ntil/ City County Birth date CSC ID (if applicable) Email address county

General Agreement/Waiver

١,	,, hereby indicate my desire to participate in	trip
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In consideration of permission being granted to me or for other valuable consideration, the receipt and sufficiency of which are acknowledged, I am entering into this release agreement, which extends to the Board of Trustees of Community College District No. 518, Counties of Hancock, Henderson, Knox and Warren Counties, and parts of Fulton, Henry, McDonough, Mercer, Schuyler, and Stark Counties, State of Illinois, commonly known as Carl Sandburg College, and the Carl Sandburg College Foundation, as well as any trustees, directors, board members, agents, employees, volunteers, representatives, successors or assigns thereof, individually and in any capacity or relationship with or for any of the aforementioned.

My participation will or could subject me to numerous dangers or risks of personal injury. These risks and dangers have been considered and, relying on my own judgment, I have voluntarily chosen to participate and assume all such dangers and risks.

I knowingly, voluntarily and for adequate consideration release and waive, and further agree to indemnify, hold harmless and reimburse each and all of those released, from and against any claim which I, any relative or next of kin of mine, or any other person, firm or corporation may now or hereafter have or claim to have (known or unknown, seen or unforeseen, directly or indirectly, or within or without the control of those released), for or on account of any losses, damages, personal injuries, pain and suffering, death, property damage, or contract claims resulting from, or arising out of, during, or in connection with my participation in such activity, or the ownership, operation, use, maintenance or control of any vehicle, equipment or goods provided or used in connection with such activity, or in any way connected with or arising out of instruction, training, emergency care, or operations incidental to such activity.

- 1. I certify that the information given on this application is true and complete.
- 2. I understand that Carl Sandburg College has the right to revoke this privilege or dismiss me from the program if my conduct is:
 - a) in violation of the rules and guidelines of Carl Sandburg College.
 - b) in violation of rules and guidelines set forth by Carl Sandburg College faculty accompanying the group.
- 3. I understand that I am expected to be on time and participate in planned activities. The group will continue with their plans, and it is my responsibility to locate the group at my expense. Failure to stay with the group may lead to dismissal from the program.
- 4. I agree to inform the course instructors as early as possible, but no later than two months prior to the program's departure of any conditions that may require special accommodation.
- 5. I understand that the College reserves the right to make changes to the program itinerary at any time and for any reason with or without notice, and the College shall not be liable for any loss whatsoever to participants by reason of any such cancellation or change. The College is not responsible for penalties assessed by air carriers that may result due to operational and/or itinerary changes, regardless of whether the participant or the College made a flight arrangement. Any additional expenses resulting from the above will be paid by the participant. The College reserves the right to substitute hotels or accommodations or housing of similar category at any time. Specific room and housing assignments are within the sole discretion of the College.
- 6. I understand and acknowledge that the College does not assume responsibility or liability, in whole or in part, for any delays, delayed or changed departure or arrival times, fare changes, dishonors of hotel, airline or vehicle rental reservations, missed carrier connections, sickness, disease, injuries (including death), losses, damages, weather, strikes, acts of God, circumstances beyond the control of the College, force majeure, war, quarantine, civil unrest, public health risks, criminal activity, terrorism, expense, accident, injuries or damage to property, bankruptcies of airlines or other service providers, inconveniences, cessation of operations, mechanical defects, failure or negligence of any nature howsoever caused in connection with any accommodations, restaurants, transportation, or other service or for any substitution of hotels or of common carrier beyond the College's control, with or without notice, or for any additional expenses occasioned by any of the foregoing. If due to weather, flight schedules, or other uncontrollable factors I am required to spend additional nights, the college will not be responsible for my hotel, transfers, meal costs or other expenses. My baggage and personal property is at my risk entirely.
- 7. I agree to uphold individual and group standards appropriate to the setting of the program as described in the orientation meeting and other materials. If my actions are judged to be injurious to the program, myself, or other individuals, and/or seriously offensive; in the sole discretion of the onsite faculty member, my participation will be terminated without refund of any fees and I will return to home at my own expense.

- 8. I grant permission to reproduce and use for educational/marketing purposes all photographs, videos, movies, or sound recordings taken of me during the time I participate in the experience.
- 9. I understand and acknowledge that there are inherent health risks associated with traveling. I agree that I am personally responsible for obtaining all health information, instruction, medical procedures, immunizations and medications appropriate for my intended travel. I recognize that the College is not responsible for any of my medical or medication needs, and I assume all risk and responsibility therefore.
- 10. I understand that if I choose to travel independently during my free time, such travel will be unsupervised by the College, its agents or employees. I agree that the College, its agents and employees shall have no responsibility or liability for any injury, damage or loss suffered by me during such periods of independent travel. I agree that in the event that I become detached from the group due to failure to meet the group at an assigned time, I will bear all responsibility to seek out, contact, and reach the group at its next available destination, and I understand that I will bear all the costs involved in contacting and reaching the group.
- 11. I understand that if my participation is terminated by onsite faculty, I will be sent home with no refund or fees. If I am sent home before completion of the experience, I agree that I will be responsible for any and all costs and expenses associated with my return home. I also understand that if I leave the program voluntarily for any reason, including illness, I will be responsible for any and all costs and expenses associated with my return home and that there will no refund of any fees.
- 12. I agree to assume financial responsibility for the program fees as determined by Carl Sandburg College and for my own personal expenses.
- 13. I grant the onsite faculty full authority to take whatever action they deem warranted under the circumstances for my health, safety and welfare, and the health, safety and welfare of other participants, including but not limited to arranging for my medical treatment and my separate transportation home. I will pay any additional costs incurred in all such events.

I hereby attest and verify that I have read and understand this agreement and that I have full knowledge of the risks involved in this program and will abide by each of terms and conditions of this agreement.

Participant name (print):	
Participant signature:	Date:
If participant is under 18 years of age at the time of application, but	will be 18 at the time of departure:
Parent/guardian name (print):	
Parent/guardian signature:	Date: