Office of Student Leadership & Activities

DELAWARE STATE UNIVERSITY
STUDENT/STAFF TRAVEL RELEASE FORM

PLEASE READ, PRINT, AND SIGN

I, ___________________, in consideration of being allowed to attend a trip to
__________________________, a Delaware State University
activity, voluntarily assume all risk of loss damage, illness, or injury to my person or
property which I may sustain while so engaged or as a result thereof, and release
Delaware State University, their officers, agents, and employees from all claims, demands, and causes of action on account of any loss or injury which my
occur during my attendance on the trip or as a result thereof, whether arising though
the negligence, or omission, default or other action of Delaware State University,
their officers, agents and employees and/or person or organization associated with
such activities.

I fully recognize that the activities associated with my attendance on the trip include
but is not necessarily limited to being transported to and from and during the event
by transportation arranged by Delaware State University officials. I am aware that
there are risks associated with the event described above and that if I suffer bodily
injury, or property loss arising out of my attendance at the event, I voluntarily choose
to assume these risks to attend the activity. I have read and signed this document
with full knowledge of its significance to include the rules for the activity and the
student handbook that governs policies, procedures, and expected behaviors of
students who attend Delaware State University.

INDIVIDUAL INSURANCE

It is suggested that participants obtain appropriate insurance on an individual basis.
If participant is presently insured, it is suggested that participant or participant’s
parent on behalf of participant check participant’s policy to ensure participant of
sufficient and appropriate coverage.

__________________________________________  _______________________
Signature of Student/Staff                  D Number

__________________________________________
Date

E:/Student-Staff Travel Release Form