

ACADEMIC FIELD TRIP ADDITIONAL RISK INFORMATION

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Field Trip/Activity:	
Trip Location/Address:	
Trip Date:	Activity Time(s):
Instructor:	Department/Course:
participating in this Field Trip, which injury, pain, suffering, illness, distributed paralysis), economic or emotional your own or other's actions, inact of the Field Trip location(s) or face	nake you aware of risks associated with traveling to/from and hich include but are not limited to physical or psychological sfigurement, temporary or permanent disability (including al loss, and/or death. These injuries or outcomes may arise from tion, or negligence; conditions related to travel; or the condition cilities. You must assume all related risks, both known or in this Field Trip, including travel to, from and during the
	reseeable risks (i.e. slipping/tripping on rugged terrain, uding rodents, extreme weather, etc.)
Standard of Conduct	
and instructions for student behave California Code of Regulations §4 that arise at a time when you are recaused by your failure to remain used instructions. You acknowled conduct, could lead to sanctions be	Trip you must comply with the University's rules, standards, vior as stated in the Student Code of Conduct in Title 5 41301. You waive and release all claims against the University not under the direct supervision of the University or that are under such supervision or to comply with such rules, standards age and understand that any violation of the above standards of being imposed on you that are consistent with CSU Student es, including but not limited to, suspension or expulsion from
be made to contact the person who	sent -aid treatment, is required, you understand that an attempt will lose information you have provided. If contact with that person in for medication attention to be administered.
Use this space to describe emerge	ency procedures while at the field location

NOTE: This information remains with the participant, and the signed Release remains on file with the Department.

Rev. January-2018