James Madison University
Travel
Assumption of Risk Certificate

Participation in James Madison University (JMU)-sponsored travels is entirely voluntary, and conditional upon compliance with University policies, rules, and instructions. In determining whether you will participate in the activity, you should be aware that JMU cannot ensure your safety or undertake financial responsibility for you or your personal property in the event that you are injured or your personal property is damaged or lost while participating in the activity.

In consideration of JMU permitting your participation in the activity, you must agree to assume the risk associated with the activity, as well as with travel to and from the activity. As is the case with many other activities in which you may engage, you should determine whether you or your family have health or accident insurance in effect to adequately cover you should you be injured while participating in this activity. JMU faculty and staff will seek to minimize travel hazards by implementing appropriate safety measures. However, to reduce the risk of accidents, travelers must abide by the following travel provisions:

1. Obey all safety instructions given by the travel leader. Travelers not conforming to these instructions may be dismissed from the trip.
2. Stay with the group or working teams except by clear arrangement with the travel leader. Immediately alert the trip leader if someone becomes separated from the group.
3. Immediately report any accident, injury, illness, or “near miss” to the travel leader.
4. Wear appropriate clothing, footwear, and personal protective equipment.
5. It is recommended that prior to the trip; you notify the field trip leader of any specific difficulties or medical condition that may impact your ability to participate safely and meaningfully. Carry a sufficient supply of any necessary medication.
6. All participants must observe state law restricting the use of tobacco products or alcoholic beverages at any time in state vehicles.

JMU Travel Participant Release Form

I have read and understand the foregoing explanation of the risks inherent in the voluntary travel activity. I am at least eighteen years of age, and it is my decision to participate in the activity, if accepted by James Madison University. I hereby accept the risk of injury to me and to my personal property as a result of participating in the activity, and, as further consideration for its permitting me to participate in the activity, I hereby release James Madison University from any and all damages, injuries, claims, causes of actions, or losses of any kind which I may have resulting in whole or in part from my participation in off-campus travel activities. I further release the following property owners

Property owner ______________________________________________________

– and their employees, officers, affiliates, agents, and advertising and promotional agencies – from any and all damages, injuries, claims, causes of actions, or losses of any kind which I may have resulting in whole or in part from my participation in off-campus travel activities.

I understand that if I have any question about the foregoing at any time in the future, I may contact the JMU University Risk Management Office at 540-568-6495 or riskmanagement@jmu.edu, who has sole authority in this matter.
Name (print) ____________________________ Date _____________

Name (signature) _________________________

Witness (print/signature) _____________________________

Persons to contact in case of emergency:
Name: _________________________________

Contact information:
Cell phone: ________________________

Work phone:______________________

Home phone: ______________________

Person to contact in case of emergency:
Name: _________________________________

Contact information:
Cell phone: ________________________

Work phone:______________________

Home phone: ______________________

Person to contact in case of emergency:
Name: _________________________________

Contact information:
Cell phone: ________________________

Work phone:______________________

Home phone: ______________________