

St. Clair County Community College Trip Liability Waiver

I acknowledge that there are risks associated with making any trip and that these risks include, but are not limited to; accidents while a passenger in or on a vehicle or while a pedestrian, illnesses related to food, weather, or other causes, and actions of other people. I hereby assume all the risks of participating on this trip.

In consideration of my application and permitting me to participate on this trip, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns to:

- A. Waive, release, and discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me, including as to my traveling to and from all destinations associated with this trip, the College, its elected and appointed officials, employees, students, and volunteers working in behalf of the College.
- B. Indemnify and hold harmless the entities or persons mentioned in the above paragraph "A" from any and all liabilities or claims made by other individuals or entities as a result of or relating to my attendance at or participation in this trip.

PHOTOGRAPH RELEASE: I hereby authorize SC4 and its elected and appointed officials, employees, agents, students, volunteers, or anyone acting under its authority or permission, the irrevocable and unrestricted right and permission to:

- a) Record my participation and appearance on a videotape, audiotape, photograph, digital, electronic or any other medium.
- b) Use my name, likeness, voice and biographical material in connection with these recordings.
- c) Use, reproduce, exhibit or distribute in any medium (e.g., print publications, Internet) these recordings in whole or in part for any purpose that SC4 deems appropriate, including promotional or advertising efforts.

I waive any right that I may have to inspect or approve the finished product or products that may be used in connection therewith or the use to which it may be applied. I release, discharge, and agree to hold harmless SC4, its elected and appointed officials, employees, agents, students, volunteers, or anyone acting under its authority or permission, from liability by virtue of any distortion, alteration, inaccuracy, whether intentional or otherwise, that may occur or be produced in the recorded presentation material or in any subsequent processing thereof, as well as any publication thereof, including without limitation any claims for libel, slander, false light, or invasion of privacy. I understand that all such recordings, in whatever medium, shall remain the property of SC4 and that I am not entitled to any compensation from SC4 for use of the recordings.

I hereby certify that I have read this document and understand and agree to the terms and content.

Signature

Date

Name (Print)

I am over 18 _____
I am under 18 _____
please initial and date

Parent/Guardian Signature (required if
student is under 18)

Parent/Guardian Name (Print)

08/16/2016