

**THE UNIVERSITY OF AKRON-  
WAYNE COLLEGE**

ASSUMPTION OF RISK  
FIELD TRIP

I, \_\_\_\_\_, of \_\_\_\_\_,  
\_\_\_\_\_

Ohio, do hereby acknowledge that I am a student at The University of Akron's Wayne College, enrolled in the course:

Course Title: \_\_\_\_\_

Course No.:

I desire to participate in a certain field trip in conjunction with this course. Such field trip shall be to \_\_\_\_\_ for the purpose of observation and review of \_\_\_\_\_. I understand that this learning experience, through observation at an agency outside Wayne College, has certain inherent risks.

In consideration of my being permitted to participate in this activity, I do hereby acknowledge that I am fully aware of all risks and hazards that may be directly or inherently involved in this activity. With full knowledge of the facts and circumstances surrounding this activity, I do hereby assume all responsibility and risk from my participation in this activity, including all risk of property damage, injury, and other hazards to me.

I do hereby assure officials of Wayne College that I have adequate health insurance necessary to provide for and pay any medical costs that may be attendant as a result of injury to me from my participation in this activity.

I do hereby further assure officials at Wayne College that there are no health-related reasons or problems which preclude or restrict my participation in this activity.

The foregoing is submitted and executed with full knowledge of the contents and consequences herein stated.

Witnesses:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_