

# Class Participation Form

## Autumn in Arkansas Historical Travel Tour

### LIABILITY RELEASE

The Center for Regional Programs accepts no responsibility for loss of personal articles and effects, nor for personal accidents, injuries, losses or additional expenses due to transportation or other causes arising due to participant's participation in a class.

I, \_\_\_\_\_, a participant of the Arkansas Historical Travel Tour class am over the age of eighteen (18) and have chosen to participate in this field trip to areas of north central Arkansas on Saturday, October 24, 2009.

**Location**

**Date(s)**

I am aware that participating in field trips carries the risk of personal injury, property damage, or other loss. I fully release and discharge Arkansas State University and its officers, agents, and employees from any and all claims for personal injury, property loss/damage or other losses resulting from my participation or the participation of minors in my care on this field trip. I assume all risk of personal injury, property damage, and other loss which may result from my participation. I further agree to indemnify and hold harmless Arkansas State University, its officers, agents and employees from all claims, suits actions, injuries, damages, and losses sustained by me or any minors in my care arising out of, connected with, or in any way associated with my participation in this event.

**I HAVE FULLY READ AND UNDERSTAND THE FOREGOING.**

Participant's Name (print) \_\_\_\_\_

Participant's Signature \_\_\_\_\_

Date \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

It is strongly recommended that you provide optional emergency contact and insurance information. This will benefit you in the event of unforeseen circumstances that might require medical or family assistance/intervention.

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy/ID: \_\_\_\_\_

**Participation form must be completed and returned before departure to participate in class. Mail to: Community Education, P.O. Box 2260, State University, AR 72467, or Fax to: (870) 972-3849.**