

**WAIVER FOR STUDENTS OR NON-EMPLOYEES USING NON-INSTITUTION-PROVIDED
TRANSPORTION TO ATTEND OFF-CAMPUS EVENTS**

This form is to be signed by all students who are voluntarily desire to self-transport and not utilize Reinhardt University-provided transportation to an off-campus event and choose to obtain/provide their own transportation. This form must be completed, signed, and turned in to the Finance and Administration Office prior to departure for the event.

Name of event: _____

Location(s) of event: _____

Date(s) of event: _____

Group attending event: _____

Faculty/Staff Advisor: _____

I, _____, am aware that Reinhardt University has made transportation available to and from the abovementioned event (hereinafter "Student Activity"). Since I desire not to use Reinhardt University-provided transportation, I have decided to arrange for other transportation so that I can attend and/or participate in the above mentioned event. In consideration for using my own transportation, I agree as follows:

REQUIREMENTS: I understand that I am responsible for all costs and expenses related to my transportation. I certify that if using my personal vehicle, I have the minimum automobile liability insurance coverage required by law. Reinhardt University's insurance will not cover any liability caused by the use of a personal vehicle while on this trip. Any occupants in my vehicle on this trip will not be covered by insurance carried by Reinhardt University and any risk taken by having them as passengers in my car will be borne by me/my personal insurance carrier. I understand that Reinhardt University, including its governing board, trustees, directors, officers, employees, and any students, agents or volunteers acting at Reinhardt University's direction (collectively referred to as "Releasees"), shall not be held liable for the manner in which I operate my personal vehicle. I understand and agree that all passengers in my vehicle who are students at Reinhardt University shall have executed this release before departing for the Student Activity. I further understand that if I take any transportation other than Reinhardt University-provided transportation, Releasees shall not be held liable for any damage, loss or injury which may be sustained by me in consequence of my transportation **REGARDLESS OF WHETHER THE INJURY, DAMAGE OR DEATH IS CAUSED BY THE RELEASEES, UNLESS THE INJURY DAMAGE OR DEATH IS CAUSED BY THE RELEASEES' NEGLIGENCE, GROSS NEGLIGENCE OR INTENTIONAL ACTS.**

RELEASE AND WAIVER: I hereby waive and release any and all claims, actions, causes of actions, and demands I may have against Releasees for, upon or by reason, of any damage, loss or injury which may be sustained by me in consequence of my transportation to and from the abovementioned event **REGARDLESS OF WHETHER THE INJURY, DAMAGE OR DEATH IS CAUSED BY THE RELEASEES, UNLESS THE INJURY DAMAGE OR DEATH IS CAUSED BY THE RELEASEES' NEGLIGENCE, GROSS NEGLIGENCE OR INTENTIONAL ACTS.**

Reinhardt University expressly disclaims liability for actions of third parties, which includes but is not limited to students, agents or volunteers who are not acting under the direction and control of Reinhardt University. I, hereby release Releasees from any and all liability, including any and all claims, demands, causes of action (known or unknown), suits, or judgments of any and every kind (including attorneys' fees), arising from any injury, damage or death that I may suffer as a result of actions of any third parties who are not Releasees.

I hereby agree and understand that the terms hereof shall be binding upon myself, my heirs, assigns, and personal representatives. All matters hereunder shall be resolved in accordance with the laws of the State of Georgia, notwithstanding the location of the abovementioned event, the route of travel or the location of my personal residence.

INDEMNITY: I, on behalf of myself, my personal representatives, heirs, executors, administrators, agents, and assigns, agree to hold harmless Releasees from any and all liability, including any and all claims, demands, causes of action (known or unknown), suits, or judgments of any and every kind (including attorneys' fees), arising from any injury, damage or death that I or any person traveling with me may suffer as a result of my self-transport to the above-mentioned Student Activity, **REGARDLESS OF WHETHER THE INJURY, DAMAGE OR DEATH IS CAUSED BY RELEASEES OR OTHERWISE, UNLESS THE INJURY DAMAGE OR DEATH IS CAUSED BY RELEASEES' NEGLIGENCE, GROSS NEGLIGENCE OR INTENTIONAL MISCONDUCT.**

I further agree that, in the event that I or any of my family members, personal representatives, heirs, executors, administrators, agents, assigns or any other third party attempts to assert any claims, demands, causes of action (known or unknown), suits, or judgments of any and every kind (including attorneys' fees), arising from any injury, damage or death to me, including but not limited to any injury resulting from my own negligence, gross negligence or intentional misconduct during or related to the Student Activity, **I AGREE TO DEFEND AND INDEMNIFY RELEASEES AGAINST SUCH CLAIMS, DEMANDS, CAUSES OF ACTION (KNOWN OR UNKNOWN), SUITS, AND/OR JUDGMENTS OF ANY AND EVERY KIND (INCLUDING ATTORNEYS' FEES) TO THE FULLEST EXTENT PERMITTED BY LAW.**

I hereby acknowledge that I have read, understand and will abide by each of the terms and conditions of this Agreement. I understand that I may seek legal counsel of my own choosing to fully explain any terms of this Agreement to me before I sign it.

Date: _____

(Signature of Student)

(Student I.D. Number)

(Printed Name of Student)

Signature of Parent/Guardian for Participants Who Are Minors:

I certify that I have custody of the student or am the legal guardian of the student by court order. I HAVE READ THIS AGREEMENT AND FULLY UNDERSTAND AND AGREE TO ITS TERMS. **I AM AWARE THAT THIS AGREEMENT INCLUDES A RELEASE AND WAIVER OF LIABILITY, AN ASSUMPTION OF RISK, AND AN AGREEMENT TO INDEMNIFY RELEASEES.**

Date: _____

(Signature of Parent or Guardian)

(Printed Name of Parent or Guardian)

Received by:

Date: _____

(Signature)

(Printed Name of Institution Official)