

KENTUCKY WESLEYAN COLLEGE <u>RELEASE FROM LIABILITY - MINORS</u>

In consideration for being permitted to participate in	activity
managed by (KWC representative), during the pe	eriod of
(dates), I, as legal guardian of	(minor)

acknowledge and agree as follows:

ACKNOWLEDGEMENT OF RISK

I, the undersigned, do fully recognize and appreciate the dangers inherent in the minor traveling to and participating in these activities. I hereby state that I have full knowledge of the dangers involved in these activities and agree to assume all risks and responsibilities associated with the minor's participation in these activities.

AGREEMENT TO RELEASE FROM LIABILITY

I, the undersigned, as legal guardian of the minor and on behalf of the family and personal representatives, hereby agree to forever release and hold harmless Kentucky Wesleyan College, all of its trustees, officers, agents and employees for any and all liability arising from any claim, demand or cause of action of any nature for:

- personal injury to minor or to others
- damage to minor's personal property or to the personal property of others or
- minor's death

as a result of their participation in the activities listed above or caused by conduct of Kentucky Wesleyan College, any of its officers, agents or employees.

I certify that the minor listed above is in good health and has no physical limitations that would preclude them from safely participating in these activities.

MEDICAL EMERGENCY INFORMATION & CONTACT

Minor Student's Name:	
Health Insurance Company:	Policy #
Insurance Contact Information or attach copy of medical in	surance card:
Medical conditions that you wish to disclose:	
Legal Guardian Contact Name:	Relationship to Minor Student:
Legal Guardian Emergency Contact Phone Number:	
I fully understand that the terms of this agreement are legal	ly hinding and that I am signing this agreement

I fully understand that the terms of this agreement are legally binding and that I am signing this agreement on behalf of the minor after having completely read it.

Signature of Legal Guardian

M:\Business Policies-Procedures\Insurance Release Form From Liailibity - Minors.doc