ROWAN UNIVERSITY

School of Osteopathic Medicine

RELEASE AND PROMISE NOT TO SUE

(STATEMENT OF UNDERSTANDING AND AGREEMENT REGARDING STUDENT PARTICIPATION IN OFF-CAMPUS ACTIVITIES, FIELD TRIPS, ETC.)

Rowan University students, while away from the University campus on field trips and other University associated activities, including but not limited to academic, drama, music, athletic, volunteer and other activities, and University sponsored, affiliated or approved clubs, etc., are expected to conform their behavior to Rowan University policies.

In consideration for participation in activities of Rowan University, I agree to conduct myself in conformance with policies established by the University and agree to be under the general authority and supervision of the club/class sponsor/faculty member or other University approved and designated supervisor.

I understand that the class/club sponsor/faculty member, designated supervisor and the University are not responsible for negligence or misconduct on account of my behavior or in case of loss, damage and/or injuries I may suffer while participating in the activity. I agree to RELEASE the University and discharge it from any and all liability, and AGREE NOT TO SUE Rowan University, its faculty, trustees, staff, employees, and agents ("released parties") for any personal injury or other damage resulting from my participation in the University activity.

I agree that if a claim arises out of my personal injury or property loss, I shall INDEMNIFY AND HOLD HARMLESS released parties against any such claims, including attorney's fee incurred by the University in defending such claims.

I fully understand any and all potential risks that may relate to participation in the specific activity I have chosen.

I have READ and UNDERSTAND this "RELEASE AND PROMISE NOT TO SUE" and freely and voluntarily agree to all of its terms. I am 18 years old or older and competent to sign. The "RELEASE AND PROMISE NOT TO SUE" shall be binding on my executors, survivors, heirs and assigns.

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Conference / Meeting Name **EXACT dates of travel**

_____

Participant Signature **Participant Rowan ID Number** **Date**

_____

Participant Name, printed clearly **Participant's Rowan E-Mail Address**