Form K RELEASE AND HOLD HARMLESS AGREEMENT

I, the undersigned party; have freely and voluntarily decided to participate in activities associated with student organizations at Bishop State Community College. I understand that by participating in such activities, I may be asked to travel in college vehicles or personal automobiles of college employees to attend events associated with the College. As a result, I further understand that I am not entitled to any insurance coverage or medical benefits, which the College may provide. I am willingly accepting full responsibility and liability for any injury which I might suffer during my travels, and I hereby release and hold harmless Bishop State Community College and its officials and employees from any claim or liability relating to any injury, including death, which I might suffer during or as a result of my participation.

Student	Date		
Date of Birth	Student Number		
Address			
City	State	ZIP	
Emergency Contact			
Relationship			
Cell Phone ()	Work Phone ()	
Home Phone ()			