



SOUTHERN UTAH UNIVERSITY LEADERSHIP WEEKENDS

ACCEPTANCE & WAIVER OF LIABILITY

NAME [PLEASE PRINT]: _____

PARENT/GUARDIAN NAME: _____

PARENT/GUARDIAN HOME PHONE: _____

PARENT/GUARDIAN CELL PHONE: _____

I, _____, as a parent or legal guardian of _____, understand and represent that his/her participation in the Southern Utah University Leadership Weekend is wholly voluntary. I hereby agree to hold Southern Utah University and/or the State of Utah harmless and assume all liability unto myself for any accident, injury, sickness or death which may occur to my student as a direct result of his/her participation in the activity except to the extent such injury or death arises as a result of gross negligence or intentional misconduct of Southern Utah University, any of its employees or students. I understand that my student will receive transportation and boarding during the weekend. It is understood that Southern Utah University does not have any insurance or fund of any kind which can or will insure my student against injury, harm, or death, which may result from my dependent's participation in this weekend, and that I must personally stand any cost therefore, or should I so desire, I must personally arrange and pay for such coverage through independent commercial insurance sources. I certify that I have signed this waiver intentionally and voluntarily, without any coercion or duress and with full and accurate understanding of its meaning and effect.

Parent/Guardian Signature

Date

This waiver must be signed by a parent/guardian even if you will be 18 at the time of the weekend. Please indicate any special medical or diet considerations below.

YOU MUST HAVE THIS WITH YOU IN ORDER TO CHECK-IN