

FLORIDA INTERNATIONAL UNIVERSITY

RELEASE FORM

I, the undersigned, hereby voluntarily release, discharge, waive and relinquish any and all actions or causes of action for personal injury, property damage, or wrongful death occurring to me arising as a result of engaging in field trips in Introduction to Marine Biology at FIU or any activities incidental hereto wherever or however the same may occur. I, for myself, my heirs, executors, administrators, and assigns hereby release, waive, discharge and relinquish any action or causes of action, of aforesaid, which hereafter arise for me and my estate, and agree that under no circumstances I will or my heirs, executor, administrators, and assigns prosecute, present any claim for personal injury, property damage, or wrongful death against the Florida Board of Regents, Florida International University, its facilities, or any of its officers, instructors, agents or employees for any of said causes of action, whether the same shall arise by the negligence of the said persons, or otherwise. IT IS MY INTENTION BY THIS INSTRUMENT TO EXEMPT AND RELIEVE THE FLORIDA BOARD OF REGENTS AND FLORIDA INTERNATIONAL UNIVERSITY, THEIR RESPECTIVE OFFICERS, INSTRUCTORS, AGENTS OR EMPLOYEES, FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE, OR WRONGFUL DEATH CAUSED BY NEGLIGENCE.

I have no physical condition that would prevent me from participating in this activity. I am in good health and physical condition. I understand the dangers involved in this kind of activity, including, but not limited to the risk inherent with travel.

I, the undersigned, have read this release and understand all its terms. I am 18 years of age or older and I executed voluntarily and with full knowledge of its significance.

SIGNATURE _____
NAME (Please Print) _____
DATE _____

PS. Bring a bag lunch and several bottles of water for the 3 hour field trip.