ASSUMPTION OF RISK AND RELEASE OF LIABILITY FORM

	rstand that Miami University (ÒMiamiÓ\$ sponsoring a trip/workshop tolowing dates for the purpose of		
	lowing dates for the purpose of EventÓtor this form, the term ÒEventÓ shall also include all travel to and from the destination)ling with a participant of the Event.	shall be	
In cons	sideration of being able to accompany the participant to the Event, I knowingly and voluntarily:		
¥	¥ acknowledge and understand that my participation in the Event is entirefynwyolpurdpeyty during the Event;		
	¥ acknowledge that any Miami p tr	ersonnel or ag	
	ained to care for any physical or medical problems of individuals participating in the Event; as	nd	
¥	Y represent that I have adequate health and hospitalization insurance for any injuries that I may receive as a result of my participation in the Event.		

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I understand and agree that if I am signing this form on behalf of my minor child, that: (i) I will be giving up the same rights for the minor as I would be giving up if I signed this document on my own behalf, and (ii) I personally represent and warrant that I am authorized to sign the form on behalf of the minor.

Signature:	Date:
Name (Printed):	Telephone:
Address:	
Parental/Legal Guardian Co-Signature (if under 18):	