

**RELEASE OF LIABILITY. PROMISE NOT TO SUE. ASSUMPTION OF RISK
AND AGREEMENT TO PAY CLAIMS**

PLEASE PRINT TWO-SIDED.

Activity(ies) _____

Activity Date(s) and Time(s) _____

Activity Location(s), Premises or Facility (ies) _____

In consideration for being allowed to participate in this Activity(ies) and/or use of the Premises or Facility, on behalf of myself and my next of kin, heirs and representatives, I **release from all liability and promise not to sue** the State of California; the Trustees of The California State University; Cal Poly Pomona; and their employees, officers, directors, volunteers and agents (collectively "University") and Cal Poly Pomona Foundation, Inc.; Cal Poly Pomona Associated Students Inc.; Cal Poly Pomona Philanthropic Foundation; and their employees, officers, directors, volunteers and agents (collectively "Auxiliaries") from any and all claims, **including claims of the University's and/or Auxiliaries' negligence**, resulting in any physical or psychological injury (including paralysis and death), illness, property damage, or economic or emotional loss I may suffer because of my participation in this Activity(ies), including travel to, from and during the Activity.

I am voluntarily participating in this Activity(ies). I am aware of the risks associated with traveling to/from and participating in this Activity(ies), which include but are not limited to physical or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, death and/or property damage. I understand that these injuries or outcomes may arise from my own or other's actions, inaction, or negligence; conditions related to travel; or the condition of the Activity location(s). **Nonetheless, I assume all related risks, both known or unknown to me, of my participation in this Activity(ies), including travel to, from and during the Activity.**

I agree to **hold** the University and/or Auxiliaries **harmless** from any and all claims, including attorney's fees or damage to my personal property that may occur as a result of my participation in this Activity(ies), including travel to, from and during the Activity. If the University and/or Auxiliaries incur any of these types of expenses, I agree to reimburse the University and/or Auxiliaries. If I need medical treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I am 18 years or older. **I understand the legal consequences of signing this document, including (a) releasing the University and/or Auxiliaries from all liability, (b) promising not to sue the University and/or Auxiliaries, (c) and assuming all risks of participating in this Activity(ies), including travel to, from and during the Activity.**

I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms.

I have been informed and understand there remains a risk of exposure to COVID-19. I understand that regardless of any precautions taken, an inherent risk of exposure to COVID-19 will exist.

I have read this document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

Participant Signature: _____

Participant Name (print): _____ Date: _____

If Participant is under 18 years of age:

I am the parent or legal guardian of the Participant. **I understand the legal consequences of signing this document, including (a) releasing the University and/or Auxiliaries from all liability on my and the Participant's behalf, (b) promising not to sue on my and the Participant's behalf, (c) and assuming all risks of the Participant's participation in this Activity(ies), including travel to, from and during the Activity.** I allow Participant to participate in this Activity(ies). I understand that I am responsible for the obligations and acts of Participant as described in this document. I agree to be bound by the terms of this document.

I have read this two-page document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

Signature of Minor Participant's Parent/Guardian

Name of Minor Participant's Parent/Guardian (print)

Date

Minor Participant's Name (print)

Field Trip Information			
Department:		College:	
Field Trip Description:		Field Trip Location:	
Begins on (date/time):		Ends on (date/time):	
Faculty/Staff Emergency Contact Name:		Faculty/Staff Emergency Contact Telephone No:	

Field Trip Participant List				
Participant Name:	In Case of Emergency Contact (Name/Relationship to Participant)	Phone Number	Faculty/Staff to complete this section at the Field Trip Site	
			Is participant listed present at Field Trip Site?	
1.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
2.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
3.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
4.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
6.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
7.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
8.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
9.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
10.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
11.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
12.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
13.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
14.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
15.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
16.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
17.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
18.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
19.			YES <input type="checkbox"/>	NO <input type="checkbox"/>

Field Trip Participant List (Cont.)

Participant Name:	In Case of Emergency Contact (Name/Relationship to Participant)	Phone Number	Faculty/Staff to complete this section at the Field Trip Site	
			Is participant listed present at Field Trip Site?	
20.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
21.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
22.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
23.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
24.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
25.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
26.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
27.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
28.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
29.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
30.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
31.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
32.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
33.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
34.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
35.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
36.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
37.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
38.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
39.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
40.			YES <input type="checkbox"/>	NO <input type="checkbox"/>

Completed By:

Signature:		Date:	
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Attach additional pages as needed. To be retained in the academic department for two years following completion of the field trip.

Jan. 2010

Field Trip Checklist

Field Trip Planning

- Select the field trip site. Secure the necessary department/college approvals, such as your [travel form](#) and approval for any required expenditures. The Authorization to Travel on State Business (travel form) is to be completed by the instructor and is not applicable to students. Faculty should visit the general area prior to the field trip or demonstrate sufficient knowledge of the area in order to document any potential risks.
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Method(s) used to identify risk: Site Visit Other (specify):

Document the potential risks identified and, if possible, how they are to be reduced/mitigated:

- If field trip involves foreign travel, check to make sure the proposed country is not on the [U.S. Department of State Travel Warning List](#). CSU policy prohibits travel to a country on this warning list, unless an exception is granted by the Chancellor. Submit exception request to the Provost's Office 30 days in advance of proposed travel to a country on the warning list. Contact Marissa Martinez, Executive Assistant to the Provost, extension 3393, for assistance. The Provost's Office coordinates the campus review. Requests endorsed by President Ortiz are then forwarded for review by the Chancellor.
- If field trip involves travel outside the U.S., check with Risk Management, extension 4846, regarding required Foreign Travel Insurance (cost involved for both faculty and students). Additionally, if your field trip involves driving in Mexico, you are required to purchase Mexican Auto Insurance; this can be coordinated through Risk Management.
- If chartered field trip transportation is warranted, obtain departmental approval and contact Procurement & Support Services. Otherwise, field trip is to begin and end at the field trip site and students are responsible for their own transportation.
- Develop Health & Safety Instructions for all field trip participants. Consider the need for special clothing or equipment that may be required due to site conditions. Determine any training needed for field trip participants, including training for safety gear or equipment to be utilized. Contact [Environmental Health & Safety](#) if you need assistance in identifying hazards or needed safety gear.
- Plan for and accommodate students with disabilities.
- Develop an emergency plan for your field trip. Include first aid provisions, emergency communication needs, list of local emergency contact numbers and sites, evacuation plans, etc.
- Communicate codes of conduct for students, addressing such issues as fraternizing, consuming alcohol, controlling activities, and conduct during "free time." In reviewing permissible conduct rules with students, be sure to include the CSU policy regarding alcohol and chemical substances.

Doing the Paperwork

Field Trip Itinerary

Complete a [Field Trip Itinerary Form](#) and provide a copy to your department and send one copy to the Dispatch Center in University Police Services.

Agreements and Certificates of Insurance

Some field trip sites may require a Use or Lease Agreement be signed. Only Procurement & Support Services can sign an agreement obligating the university. Any lease agreement must be reviewed and signed by procurement. (Caution: your signing an agreement may make you liable for the terms of the agreement.) Provide a copy of the Use or Lease Agreement when requesting a Certificate of Insurance. The Agreement will speak to the site's insurance requirements for the Certificate. The Use or Lease Agreement and request for Certificate of Insurance should be submitted to Risk Management with a minimum of 30 days lead time.

Course Syllabus

All academic field trips should be clearly identified as such in the course syllabus at the beginning of the quarter, with detailed information about dates, times, locations, and any other details the student will need to know about the field trip.

On the syllabus, note requirement for students to sign a Release and Hold Harmless Form. It is recommended that in the first class of the quarter, you discuss with students in appropriate detail any risks associated with the field trip and provide each student with the required Student Travel Release Notice and the Release and Hold Harmless form.

Student Travel Release Notice

The [Student Travel Release Notice](#) is required by CSU Executive Order 1041. There's nothing you need to complete on this notice, you just need to provide it to your field trip participants for their review.

Release and Hold-Harmless Form

The [Release and Hold-Harmless Form](#) is required under CSU Executive Order 1041. Any risks specific to field trip activities should be listed at the top of the Release and Hold Harmless forms.

Each field trip participant must sign a release form. If multiple field trips are being conducted during a quarter and the field trips are similar in risk, then one form can be utilized to cover multiple trips. If multiple field trips with differing risks, then a separate release is needed for each of the different trips (e.g., the release to visit a landslide site needs be separate from the release signed to visit a museum). Helpful tip: A recommendation from one faculty member to simplify this process, is to complete the top of a single release form, indicating the specifics of the activity, the dates, etc. and photocopy the completed form to hand out to students for their signature.

Academic Field Trip Participant List (Emergency Contact Information)

The [Academic Field Trip Participant List](#) is to be used until the Student Emergency Contact Report is developed. This form was developed to assist you in compiling emergency contact information for your field trip participants. This information is considered confidential and may only be utilized in the event of an emergency during the field trip that requires immediate notification of the student's emergency contact.

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