# BARTON COUNTY COMMUNITY COLLEGE
# FIELD TRIP RELEASE FORM

**Class Name:** _____
**Instructor:** _____
**Date of Trip:** _____
**Destination:** _____
**Course Objective:**_____
_____

I am aware that certain risks and dangers may occur during the class field trip. These situations may include, but are not limited to, accidents, illness, and forces of nature. In consideration of, and as partial payment for the right to participate in the trip, I have and do hereby assume all the above mentioned risks and will hold Barton County Community College harmless from any or all liabilities, actions, causes of actions, debts, claims, and demands of any kind and nature whatsoever I now have or which may arise in connection with these trips. The terms hereof shall serve as a release of an assumption of risk for my heirs, executors and administrators and for all members of my family, including any minors.

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5/24/05 E.S.