



Field Trip Liability Waiver Form

Date:	Event/Destination:
First Name:	Last Name:
Phone Number:	Email:
Emergency Contact's Name:	
Emergency Contact's Phone Number:	
Emergency Contact's Relationship to Participant:	

I am aware that indoor and outdoor activities include certain risks, including, but not limited to, the risk of loss, injury, or death. I am voluntarily participating in this activity with knowledge of the dangers involved, and therefore agree to accept full responsibility for the risk and dangers involved.

1. I agree that I will not sue, or otherwise make any claim against Nile Language School or its employees for any loss, injuries, or damages resulting from my participation in these indoor/outdoor activities.
2. I agree that Nile Language School and its employees will not be legally responsible for any loss, injury, or damage of any kind to me resulting from any cause, including negligence.
3. I agree to release Nile Language School and its employees from all actions or claims which could be brought by me, my heirs, assigns, or personal representatives for any loss, injury, or damage sustained during and resulting from participation in indoor or outdoor activities.
4. The terms of this release shall also be binding as to other people, including all family members, heirs, executors, or administrators, and including any minors who may accompany me.
5. I agree to follow the safety guidelines explained by the field trip leader and/or any other knowledgeable staff member.
6. I am legally competent to sign this release; alternatively, my parent or guardian has read and signed this release.

I have carefully read this agreement. I fully understand its contents and sign it with my own free will.

Signature	Full Name	Date
Parent/Guardian signature if applicant is under 18 years of age	Parent/Guardian's Full Name if applicant is under 18 years of age	