

Emergency Contact's Name

Department of Art & Design Mason Gross School of the Arts Rutgers, The State University of New Jersey 33 Livingston Avenue New Brunswick, NJ 08901

FIELD TRIP INFORMED CONSENT

•	That participation is at my own risk;
•	That travel to and from the site in a vehicle, or by a mode of public transportation, such as a bus, train, or subway, entails risks of bodily injury or property damage;
•	That I am physically able to participate in the activity and know of no disability that would prevent my participation;
•	That while I am on the trip there are risks of bodily injury or property damage caused by or resulting from slips, trips, falls and other forms of physical harm;
•	That participation in the trip takes place in an urban environment, in which there is a possibility to encounter unfortunate events, such as crimes such as theft, physical assault, car accidents, separation from the participating group, among others;
•	That in the event that a need for emergency medical services arises, I authorize and consent to such service being provided and assume the cost thereof;
•	For any activity that I engage in which is not scheduled by Rutgers' staff, I assume full responsibility for my engagement in the said activity.
Rutage and have of a actime risk	twithstanding these risks, I, for myself, and assigns do waive, release and discharge tigers, The State University of New jersey, its governors, trustees, officers, employees and nts from any and all claims, demands, actions, causes of actions, costs and expenses for I by reason of any personal injury, property damage, loss and expense, which heretofore re been or hereafter may be sustained or suffered by me in consequence of and as a result a certain accident, casualty or event or my present or activities in connection with this livity. I also agree to indemnify and hold harmless Rutgers for injuries sustained either by and/or caused by me to other during this activity. Furthermore, I acknowledge that the activity above are not intended to be all-inclusive and voluntarily accept all risks own or unknown.
Par	ticipants' Name (Print) Participant's Signature Date

Contact's Phone Number