



## Participant Agreement, Liability Release, and Assumption of Risks for Travel Outside of the State of Alaska

Print Form

Risk Management  
Mat-Su Borough School District  
501 North Gulkana  
Palmer, Alaska 99645  
P (907) 746-9213 || F (907) 761-4091

**Send completed forms to the teacher/coach/sponsor in charge of the activity.**

|                   |                      |             |                                |
|-------------------|----------------------|-------------|--------------------------------|
| Participant Name: | <input type="text"/> |             |                                |
| School:           | <input type="text"/> | Trip Start: | <input type="text"/>           |
| Trip Description: | <input type="text"/> |             | Trip End: <input type="text"/> |

Please select one:

- ☐ I am an adult completing the form for myself or I am an emancipated minor.
- ☐ I am a parent or legal guardian completing this form on behalf of my minor student.

As an adult participant, parent or legal guardian of the participant, or an emancipated minor participant, I hereby acknowledge that I understand the following:

- Participation in this trip is VOLUNTARY.
- The Matanuska-Susitna Borough School District (District) shall not be financially liable for costs associated with this trip, including in the event of cancellation. Reasons for cancellation may include but are not limited to: cancellation by the District or travel company; acts of God; causes outside the control of the parties, such as war, civil unrest, strike, criminal acts, public health concerns, illness, injury or death.
- Participation with this trip does come with a certain degree of inherent risk which cannot be eliminated, and includes known and as well as unknown risks.
- Participation in this trip may result in:
  - property damage, destruction, or loss;
  - exposure to bacteria, viruses, or diseases;
  - bodily injuries ranging from minor to paralysis, illness, or psychological injuries;
  - death.
- An injury or illness may impair the participant's future ability to earn a living, to engage in business, social, and recreational activities, and to generally enjoy life.
- The risk of illness, injury, or death may be caused by one or more of the following:
  - Equipment failure
  - Failure by participants to heed warnings or follow instructions
  - Participants exceeding their skills or physical condition
  - Vehicular or aviation accidents
  - Collisions with other participants, equipment, or other objects
  - The participants own negligence and the negligence of others
  - Adverse weather conditions
  - Dehydration, exhaustion, cramps, hypothermia, heat stroke/sunstroke, or fatigue
  - Slipping, tripping, or falling
  - Violence/unlawful acts perpetrated by an individual
  - Animal attacks
  - Unavailability of immediate medical care
  - Exposure to or contraction of bacteria, viruses, or diseases

- The costs associated with any medical care, medication, or visit(s) to physicians or hospitals during the trip shall remain the responsibility of the participant or the parent or legal guardian of the participant, and not the District.

In the event of injury or illness, I give my consent for medical treatment, hospitalization, or any other care as may be deemed necessary by emergency medical personnel, physicians, and other healthcare providers.

**I agree that participation with this trip is VOLUNTARY and by signing below, I acknowledge that the Matanuska-Susitna Borough School District will NOT assume any financial liability for this trip. Financial liability may include but is not limited to unused funds, the cost of any and all transportation, food, beverages, lodging, guides, agreements made with third-party travel companies, or any costs incurred by a District representative to return a participant home for any reason, including failure or refusal to obey the rules or code of conduct.**

Having read the statements contained in this document and having understood the potential risks involved with participation in this trip, I hereby give my consent as an adult participant, parent or legal guardian of the participant, or an emancipated minor participant to participate in this trip.

**FURTHERMORE, IN CONSIDERATION FOR PERMISSION TO PARTICIPATE IN THIS TRIP, I FOR MYSELF, THE PARTICIPANT, AND ANY HEIRS, SUCCESSORS, EXECUTORS, AND SUBROGEEES, KNOWINGLY, INTENTIONALLY, AND VOLUNTARILY WAIVE AND FOREVER RELEASE, INDEMNIFY AND HOLD HARMLESS, THE DISTRICT, ITS BOARD MEMBERS, ADMINISTRATORS, TEACHERS, AGENTS AND INSURERS FROM ANY AND ALL CLAIMS OF LIABILITY FOR INJURY, ILLNESS, DEATH, DAMAGES, LOSSES, OR COSTS THAT MAY OCCUR OR BE INCURRED RESULTING FROM PARTICIPATION IN THIS TRIP.**

**I HAVE READ THIS ENTIRE DOCUMENT, I UNDERSTAND IT, AND I AGREE TO BE BOUND BY ITS TERMS.**

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Parent/Guardian or Adult Student Signature

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Date

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Emergency Contact Phone

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Emergency Contact Email

Administration Instructions:

**When all forms are collected, send completed forms to [RiskManagement@matsuk12.us](mailto:RiskManagement@matsuk12.us)**