

ASSUMPTION OF THE RISK FORM

OEAS Field Trip Participant

I agree that as a participant in activities associated with OEAS and Old Dominion University, I am responsible for my own behavior and well-being. I acknowledge that I have been informed that activities and the general nature of my field trip participation involves activities which may entail harm. I understand that it does involve risks to my personal safety beyond those experienced in my everyday activities.

The same elements that contribute to the unique character of this activity can also be causes of loss or damage of personal equipment and accidental injury, illness, or in extreme cases, personal trauma or death. Risks during participation at these field sites include, but are not limited to, travel by air, travel by motor vehicle, encounters with dangerous wildlife, both seen and unseen; injury due to accident, fatigue, exhaustion, heat stress, sun poisoning, hypothermia, contact with plants, becoming lost, disoriented, or separated from my party; or changes in weather conditions, allergic reactions and physical problems for failing to treat a existing medical condition or failure to be in proper shape for the rigors of the outdoors.

I understand that I may be entering regions where communication devices may be ineffective. I also understand that there will be no assurance that special expertise in first aid will be available and, furthermore, that transport to medical care from some areas of this site may be difficult or nonexistent. I understand that in the event of accident or injury personal judgement must be employed by project personnel regarding what actions must be taken. I understand that it is my responsibility to secure personal health insurance in advance of this visit, if desired, and to take into account my personal health and physical condition.

I further agree to abide by any and all Old Dominion University (University) rules applicable to this trip; and I will take responsibility for abiding by specific requests made of me for my safety or the safety of others. I understand that the University reserves the right to exclude my participation in this field trip if at any time my participation or behavior is deemed detrimental to the safety and welfare of others or to the conduct of ongoing research.

I acknowledge that I have read and fully understand this document. I further acknowledge that my participation in OEAS activities and accept these personal risks and conditions of my own free will.

In consideration for being permitted to attend this outing on my own initiative, I hereby agree to assume the risks involved in the taking of this course. Old Dominion University, and their officers, agents, employees, interns, students, and volunteers, are not responsible for personal injury or damage to, or loss of, my property which may occur as a result of my participation in this visit or arising out of my participation in this course, excluding any such injury, damage or loss that may result from negligence by any officer, employee or agent of the University and to the extent permitted by the Virginia Tort Claims Act.

In case an emergency situation arises, please contact _____ (name) at _____ (phone number).

_____ I represent that I am 18 years of age or older and legally capable of entering into this contract.

Participant's signature

Address

Date