Liability Release, Waiver, Discharge and Covenant Not to Sue / Medical Consent

This is a legally-binding Release and Medical Consent made by me, _________________________ A#_______________, to Nashville State Community College.

I fully recognize that there are dangers and risks to which I may be exposed by participating in activities/events held on and off campus as I am a representative of Nashville State Community College during the FALL 2021 - SUMMER 2022 semesters. The following is a description and/or examples of specific, significant, non-obvious dangers and risks associated with this activity: Traveling to activities in a personal or a state car. There may be safety issues as it relates to volunteering at nonprofit organizations, attending meetings, events and or performing indoor/outdoor work on and off campus. This would also include other events/activities as they arise.

I understand the Institution does not require me to participate in this activity, but I want to do so, despite the possible dangers and risks and despite this Release.

I therefore agree to assume and take on myself all of the risks and responsibilities in any way associated with this activity. In consideration of and in return for the services, facilities, and the other assistance provided to me by the Institution in this activity, I release the Institution (hereinafter including its governing board, employees, and agents) from any and all liability, claims and actions that may arise from injury or harm to me, from my death, or damage to my property in connection with this activity. I understand that this Release covers liability claims and actions caused entirely or in part by any acts or failures to act of the Institution, including but not limited to negligence, mistake, or failure to supervise by the Institution.

I understand that Institution does not have medical personnel available at the location of the activity. I therefore grant Institution permission to authorize emergency medical treatment, if deemed necessary by the Institution. I agree that Institution assumes no responsibility or liability for any injury or damage which might arise out of or in connection with such authorized medical emergency treatment. I further state that I have adequate health insurance necessary to provide for and pay for any medical costs that I may incur during or arising from my participation in this activity.

I recognize that this Release means I am giving up, among other things, rights to sue the Institution for injuries, damages, or losses I may incur. I also understand that this Release binds my heirs, executors, administrators, as well as me.

I have read this entire Release; I fully understand it; and I agree to be legally bound by it. This is a Release of Your Rights.

Model Release

I also do hereby give my permission to Nashville State Community College including its off-campus locations, its photographers, videographers, and employees, the absolute right and permission to copyright and/or publish or use still or video photographs of me and/or quotations and testimonials from me. In which, I may be included in whole or in part, or composite or distorted in character in form, in conjunction with my own or fictitious name, or reproductions thereof in color or otherwise, for art, advertising, trade or any other lawful purpose whatsoever. I hereby waive my right that I may have to inspect and/or approve the finished product or the advertising copy that may be used in connection therewith, or the use to which it may be applied.

I hereby release, discharge, and agree to save Nashville State Community College and all parties mentioned above from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced by taking of said photos or quotations, or in the processing tending toward the completion of the finished product.

I understand that neither I, nor my family/legal guardians, nor any agent representing me will receive any fee for use of publications of this photo, video, creative work, or testimonial now or anytime in the future.

I have read the Nashville State Community College Liability Release (above) and the Model Release (above) and agree to all terms and policies as stated.

Signature of student:  _______________________________________           Date: ___________________

(Parent/Guardian must sign if student is under 18)