

**Florida State University Department of Biological Science
Field Course Statement of Voluntary Consent and Release from Liability**

In consideration of my participation in Field Trips in:

Course Number Section Course Name

and for other good and valuable considerations received by me, I the undersigned, have actual knowledge and conscious appreciation of the particular dangers involved in the Field Trip activities including, but not limited to: insect or other animal bites, accidents related to vehicular travel to, from, and on the field site, accidents related to working in the field (e.g., sprained ankles, cuts, sunburn, strained muscles, etc.), _____

I do hereby voluntarily and of my own free will and choice consent to my participation in the aforementioned activity and assume any and all risks arising therefrom.

I understand, as evidenced by my signature below, that the University does not have medical or liability insurance to cover me in the event of injury, accident, property losses, or other such occurrences arising out of my participation in the Field Trip activities, including transportation. I consent to medical treatment or referral provided to me as a result of injuries sustained from Field Trip participation. I specifically release and hold harmless The Florida State University and its Board of Trustees, employees, representatives and agents, from any and all liability, claims and actions that may arise from injury or harm to me, from my death or from damage to my property connected with the Field Trip activities and medical treatment or referral connected therewith and assume all risks, liabilities and responsibilities for any and all accident, injury or property loss arising therefrom. I understand this Release binds my heirs, executors, administrators and assigns, as well as myself.

I have read this Release, fully understand it and agree to be bound by it.

DATED THIS _____ DAY OF _____, 20____.

Student Signature

Parent of Guardian Signature, if Students is under 18 years old