GATEWAY TECHNICAL COLLEGE SERVICE LEARNING
CONSENT AND RELEASE AGREEMENT

This Agreement is designed to protect all participants in Gateway Technical College’s service learning programs, including but not limited to, students, faculty, staff, Gateway Technical College and the agencies and individuals cooperating with the College. The student must sign this Agreement, with parental or guardian approval if the student is under the age of 18, to indicate agreement with the terms and conditions of the Agreement and permission to participate in the designated program.

Name: ____________________________________ Student ID: _______________________

I understand that participation in the Gateway Technical College Service Learning Program is voluntary and that any such program involves some element of risk. I agree that in consideration of Gateway Technical College sponsoring this activity and allowing my participation, I (including my parents, guardians, and legal representatives) will release, indemnify, and hold harmless Gateway Technical College, and its Trustees, officers, employees, faculty, agents, successors, and assigns from liability for any and all claims, demands rights or causes of action, present or future, resulting from or arising out of any activity or travel conducted by or under the auspices of the Gateway Technical College Service Learning Program.

I understand that the College requires that all students be covered by appropriate accident and medical insurance and that the student be financially responsible for such expenses. My signature below verifies that I am covered by such insurance.

I HAVE READ AND UNDERSTAND THE ABOVE PROVISIONS AND AGREE TO BE BOUND BY THEM AS INDICATED BY MY SIGNATURE BELOW.

Signature of Participant ____________________________________________ Date __________

Printed Name of Participant ____________________________________________

Signature of Parent or Guardian _________________________________________ Date __________
(If Student is under the age of 18)

Course Name & Number __________________________________ Semester/Academic Year_________