



MEDICAL CENTER CAMPUS
HIALEAH CAMPUS

Ш	KENDALL CAMPUS
П	HOMESTEAD CAMPUS

☐ WOLFSON CAMPUS STEAD CAMPUS

INTERAMERICAN CAMPUS



N wreeme	nt for Off	Campus	College;	Active:
Ac.	STUDENT NAME	STU	DENT NUMBER	Z

The agreement below is designed to protect our group members in the event that an emergency might require the immediate action parents would take if they were present and also, as a necessary precaution, to protect Miami Dade College from claims which might be made by members of the group and their parents.

In the years the college has been sponsoring off-campus activities, incidents of the type covered by this agreement have been negligible. However, parents would not wish their sons or daughters to join a group under the auspices of an organization that disregarded even the remotest contingency.

We recommend that you read the provisions of this agreement carefully and if not fully understood please consult with your attorney. We hope that we shall have your full cooperation.

RELEASE

As a the	student of Miar educational	ni Dade Co benefit	ollege, I do derived	by	me	by	my	partio	nsiderate cipation release	in
which or dea contro	ty and hold Mia might be broug ath sustained b ol of Miami Da include the em	ght by me, i y me arisir de College	ny parents on good out of a lift is under	nless from traverstood	om and endents vel or a that M	and all for loss ctivity liami I	claim of process of process of conduction	s and ca operty, p cted by ollege a	uses of a ersonal or und as used l	action injury er the herein
Colle	ge.									
Student S	Signature	Da	te	Signature	of Parent of	r Guardia	1	D	ate	