

San Diego Community College District

THE STATE OF THE S		nce/Travel of Understanding
Name:		Student ID Number:
(PRINT) Last E-mail:	First	MI Telephone:
Activity:	Date of Activity:	Location of Activity:
being paid out of San D		as a representative of the college and that my expenses are nds. I acknowledge that I am expected to conduct myself in
particularly the Boa Administrative Due	ard of Trustees Policy, BP 3100 Stud Process, Section 3., Student Code	to all applicable Board of Trustees Policies and Procedures, lent Rights, Responsibilities, Campus Safety and of Conduct, as well as federal, state and local laws. Failure cies may result in being subject to disciplinary action.
	in violation of the Student Code of Code a disciplinary sanction, will be precl	Conduct while traveling as a representative of the college uded from future travel.
during the activity of provided for in Boa	or en route to and from the activity is rd of Trustees Policy, <i>BP 3100 Stud</i>	n of an illegal substance of any kind, or the use of alcohol not permitted and will result in disciplinary action as ent Rights, Responsibilities, Campus Safety and dure, AP 3100.2 Student Disciplinary Procedures.
		will not be tolerated, nor any behavior that will endanger the to a facility while on official travel is liable for replacement
	TITLE IX TRAINING: Available at <u>h</u> print and attach verification of your c	ttp://www.everfi.com/register using registration code completion of the training.
• PARTICIPATION:	Each participant is expected to activ	ely participate in all required events and activities.
		event, each participant is expected to keep the outs at all times, and to abide by the advisor's directions.
extenuating circumstar cost of my participation	nce, I will be responsible for reimburs	this activity, and I do not provide proof of emergency or sing the San Diego Community College District for the full I understand that I may be ineligible to participate in any y also be penalized.
Immediate retuDisciplinary act	ion of this agreement may result in the rn to my home at my own expense ion by the college	he following:

A hold placed on my student record

WAIVER: I acknowledge that I am attending the above-mentioned activity as an extra-curricular activity on a voluntary basis. I understand and agree that I shall voluntarily release, discharge, waive, relinquish, and covenant not to sue the San Diego Community College District, its Board of Trustees, officers, employees, agents, representatives, and volunteers from any and all liability, claims, causes of action, and demands related to or arising out of, or in connection with, my participation in this activity, including injuries, accident, illness, property damage, and death.

INDEMNIFICATION AND HOLD HARMLESS: I further agree to hold harmless, defend, and indemnify the San Diego Community College District, its Board of Trustees, officers, employees, agents, representatives, and volunteers from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees, related to or arising out of, or in connection with, my participation in this activity.

Student Signature:		Date:	
_	-		

Distribution: Student Affairs; Department Dean