

## STUDENT USE OF PERSONAL VEHICLE/AND ACCOMPANYING STUDENT **PASSENGER FORM**

## **DRIVER- RELEASE OF LIABILITY, ASSUMPTION OF RISK AGREEMENT**

Student Name: Program:				
Program Event: Date (s) of Event:				
	that I have <b>voluntarily</b> agreed to use a personal vehicle for tified above. I recognize that there are risks associated with firm as follows:			
lacksquare that I own the motor vehicle that will be used in	connection with transportation to the program event(s)			
lacksquare that my parent(s) own the motor vehicle in ques	tion and have given me permission to use it for this purpose			
that the motor vehicle registration and inspection the motor vehicle in question	on are current and valid and that I am an insured driver on			
lacksquare that any student/person who becomes my passe	enger has voluntarily chosen to travel with me			
their employees, agents, officers, contract staff, and referred to as the "Releasees"), from all liability for a	munity College (NBCC), the Province of New Brunswick, and other participants, including students (collectively hereafter any LOSS, DAMAGE, EXPENSE, INJURY (including death) that rating the motor vehicle in connection with transportation to			
I further agree to <b>WAIVE ANY AND ALL CLAIMS</b> that I have, or may have in the future, against the Releasees arising out of my operating the motor vehicle in connection with transportation to the program event(s). This agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns, and representatives in the event of my death, incapacity, or injury.				
Print Name	Signature			
Date	Driver's License Number			
Attach Photocopies of: valid driver's license, vehicle registration and insurance card.				
Parent's or Guardian's Consent (must be completed for participants <u>under the age of 19</u> and/or where the parent owns the motor vehicle)				
I am the owner of the motor vehicle in question and I have granted permission to use the vehicle for this event and he/she is an insured driver on the vehicle. [Sign if applicable]				
Signature:	Date:			
	ontrolled and must be compared to the electronic version. e of Personal Vehicle and Page 1 of 2			



I acknowledge and confirm that I am the parent/guardian of the minor(s) who has signed the above Agreement and I understand and agree that we shall both be bound by the terms set out above.

Signature:	 Date:	
Print Name:		
Witness:	 Date:	

## **STUDENT PASSENGER - RELEASE OF LIABILITY, ASSUMPTION OF RISK AGREEMENT**

(When more than one passenger accompanies the driver in same vehicle, copy this page and attach the documents)

Student Name: \_\_\_\_\_\_
Program: \_\_\_\_\_\_

Date (s) of Event:

I, \_\_\_\_\_\_, confirm that I have **voluntarily** agreed to be a passenger of \_\_\_\_\_\_\_ (driver's name) for transportation related to the program event(s) identified above. I am aware of and recognize the normal risk associated with being a passenger in a motor vehicle.

I hereby agree to **RELEASE** the New Brunswick Community College (NBCC), the Province of New Brunswick, and their employees, agents, officers, contract staff, and other participants, including students (collectively hereafter referred to as the "Releasees"), from all liability for any **LOSS, DAMAGE, EXPENSE, INJURY (including death)** that I, or my next of kin, may incur in relation to my transportation to the program event(s) identified above.

I further agree to **WAIVE ANY AND ALL CLAIMS** that I have, or may have in the future, against the Releasees arising out of my transportation to the program event(s) identified above.

This agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns, and representatives in the event of my death, incapacity, or injury.

I confirm that I have read and understood this agreement prior to signing it. I am aware that my signature below waives certain legal rights as outlined above.

Print Name

Program Event:

Signature

Date

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## Parent's or Guardian's Consent (must be completed for participants <u>under the age of 19</u>)

I acknowledge and confirm that I am the parent/guardian of the minor (s) who has signed the above Agreement and I understand and agree that we shall both be bound the terms set out above.

Signature:	Date:	
Print Name:		
Witness:	Date:	

Any document appearing in paper form is uncontrolled and must be compared to the electronic version.