

**VOLUNTARY RELEASE AND WAIVER TO PROVIDENCE COLLEGE
FOR TRANSPORTATION TO ALL ACTIVITIES**

**Assumption of Risk and Indemnity Agreement
(PASSENGER – PLEASE READ BEFORE SIGNING.)**

Name: _____ Date: _____
(Print)

Description of Activity: _____

Date(s) of Activity: _____

The undersigned person hereby requests and is granted permission to participate in an Activity as described above. The undersigned intends to ride with another person or persons in a vehicle owned and operated by an individual and not Providence College in order to participate in an Activity as described above.

In consideration for permission to participate in and to ride with another person or persons in a vehicle not owned and operated by Providence College to such Activity, the undersigned, individually and on behalf of myself, heirs, next of kin, executors, administrators, personal representatives, successors, and assigns, does hereby:

1. WARRANT that s/he chooses of her/his own volition to assume a risk of riding with another person or persons in a vehicle not owned or operated by Providence College;
2. ACKNOWLEDGE AND WARRANT that s/he is fully aware that there are hazards and risks inherent in riding with another person or persons in a vehicle not owned or operated by Providence College and assumes all such risk, and understands that Providence College assumes no responsibility of any nature whatsoever for actions of participants or any other person or entity involved with the Activity described above;
3. RELEASE, DISCHARGE, AND COVENANT NOT TO SUE Providence College for any and all claims and liability arising out of injury, death, or property damage resulting from the operation of and/or being a passenger in any motor vehicle not owned by Providence College while traveling to and/or from any location associated with the Activity described above;
4. ACKNOWLEDGE that the undersigned is aware of the inherent danger of being a passenger in a motor vehicle and hereby agrees to comply with all laws and regulations governing such activities, ASSUMING ALL RISK for her/himself and all liability to others for failure to do so.

This instrument has been executed in and shall be interpreted according to the laws of the State of Rhode Island. If any portion of this instrument is held invalid it is understood and agreed that the balance thereof shall continue in full legal force and effect.

By my signature below, I acknowledge that I have read this document, understand its terms, and that no oral representations or inducements have been made to me in order to obtain my signature on this document and that I have signed freely and voluntarily.

SIGNATURE OF PASSENGER

DATE

Parent/Guardian Signature if Student is under 18 Years of Age