

Student Field Trip Waiver

I,	(print name), voluntarily and knowingly assume	
any risk associated th	nerewith and waive my right to assert any cla	aim against Delgado Community
College, the Louisian	na Community and Technical College System	m, the State of Louisiana, or any of its
Departments, Agenci	es, Boards and Commissions, as well as its	officers, agents, servants, employees
and volunteers for in	jury or damage to my person or property res	ulting from my participation in
attending, completing	g or participating in any field trip associated	with Delgado Community College.
I further release and l	hold harmless the State of Louisiana, all State	te Departments, Agencies, Boards and
Commissions, as wel	l as its officers, agents, servants, employees	and volunteers, from any and all
claims, demands, cau	ses of action, expense and liability arising o	out of injury or death to my person as a
result of my participa	ation in attending, completing or participatin	g in any field trip associated with
Delgado Community	College, except for those claims that result	from the negligence of Delgado
Community College.		
	Challen the Ciamatana	
	Student's Signature	Date
Received:		
	Faculty Member Conducting Field Trip	Date

Form 1502/001 (10/18)