## **Alverno College ACTIVITY / EVENT WAIVER**

Sponsoring Dept./Organization:	Date(s) of Event/Activity:
Event/Activity:	Location:

## Driver for the passengers listed below: \_\_\_\_\_

By printing my name I acknowledge that participation in this activity sponsored by Alverno College is purely voluntary. I acknowledge that there are normal risks involved with transportation and participation. I will not hold Alverno College, sponsors of the activity, or the drivers responsible for such risks which may result in an injury. If the undersigned is a minor, then a parent or guardian must sign this waiver.

## PASSENGER SIGNATURES AND EMERGENCY CONTACT INFORMATION

	Name (Print)	Signature	Cell Number	Emergency Contact Name	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					