



**ALCOHOL-RELATED EVENTS
HOLD HARMLESS AGREEMENT**

Individuals who participate in Rogue Community College District (RCC) tours, field trips, excursions or class functions, where the consumption of alcohol may occur or is an integral component of the activity, must be 21 years of age, read and sign this statement, which acknowledges his/her understanding of the liability issues associated with this activity.

In consideration for providing the opportunity to participate in this activity, fully recognizing the dangers and hazards inherent in participating in the above mentioned activity, I voluntarily agree to waive and discharge any and all claims against RCC and release it from liability for any loss regardless of cause, including claims for any negligent actions of RCC or its employees or agents, to the fullest extent allowed by law, for myself, my estates, my heirs, my administrators, my executors, my assignees, and my successors. I also agree to release, exonerate, discharge and Hold Harmless RCC, its Board of Directors, the individual members thereof, and all RCC officers, agents, employees, volunteers, and representatives from all liability for any loss, claims, causes of action, or demands, including attorney fees, arising out of injuries of any kind to me, or to my property, or losses of any kind which may result from or in connection with my participation in this activity, up to and including injuries stemming from the negligent actions of RCC or its employees or agents. I further certify and represent that I have the legal authority to waive, discharge, release, and hold harmless the released parties.

Participant agrees to consult with his/her physician concerning any medical condition that may be adversely affected by the consumption of alcohol.

RCC is not providing transportation to or from this event. Participant agrees that any and all liability associated with personal transportation rests solely with the owner/operator of that vehicle for themselves and any passengers.

Class/Event: _____

Participant Name: _____

Participant Signature: _____ Date: _____

For Instructor's Use

Verification of legal age:

Type of ID _____ ID # _____ DOB _____

Instructor Name: _____ Instructor's Initials _____