



**Consent
Release of Liability
Waiver of Right to Sue
Assumption of All Risk**

I, _____, am a current WNC high school student, interested in exploring health careers. MAHEC is sponsoring a day trip to Appalachian State University on Thursday, November 20, 2025. I wish to participate in the trip to Appalachian State University as a WNC high school student interested in pursuing a health career. Transportation will be provided. In order to participate, I agree to the following:

I and my parent or legal guardian voluntarily and without duress execute this Agreement under the following terms:

1. **Consent.** I consent to participate in the MAHEC Health Careers day trip to Appalachian State University on Thursday, November 20, 2025 and I shall follow any and all instructions provided by MAHEC personnel.
2. **Release, Waiver.** I, on behalf of myself, my heirs, personal representatives, successors and assigns release, waive and discharge MAHEC, its employees, officers, directors, successors and assigns (collectively "Released Parties") from all claims or liability of any kind or nature that may directly or indirectly result in personal injury, illness, death or property damage, however caused while I am participating in the MAHEC Trip to Appalachian State University (individually and collectively "Claim"). I, on behalf of myself, my heirs, personal representatives, successors and assigns agree not to commence litigation, seek arbitration or make a Claim against the Released Parties.

If I am under age 18, my parent or legal guardian, by signing below, also consents to my release and he/she agrees that this release shall be binding upon him/her as my parent or legal guardian as to me, my heirs, personal representatives, successors and assigns. My parent or guardian also promises, by signing below to defend, indemnify and hold Released Parties harmless from any claim asserted by me against Released Parties, including its employees, officers, directors, successors and assigns, if I should repudiate this release after obtaining adulthood.

3. **Assumption of the Risk.** I understand that the MAHEC Trip to Appalachian State University will include risks that are inherent to travel and to urban areas, including without limitation, vehicular accidents, accidents while walking both indoors and outdoors, encountering street traffic or walking on uneven terrain, encountering criminal activity, travel sickness or illness resulting from food, and unleashed animals. I expressly ASSUME ALL RISKS AND DANGERS of personal injury, death, illness and property damages which could occur as a result of my participation as in the MAHEC Trip to Appalachian State University.

4. **Emergency Care.** I consent to emergency medical care and transportation in the event of injury to me as medical professionals may deem appropriate. This Release extends to any liability arising out of or in any way connected with the medical treatment, evacuation and transportation provided for me in the event of an emergency.
5. **Other.** I expressly agree that the provisions in this Agreement are intended to be as broad and inclusive as permitted by the laws of the State of North Carolina and that this Agreement shall be governed by and interpreted in accordance with the laws of the State of North Carolina. I agree that in the event that any clause or provision of this Agreement shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Agreement which shall continue to be enforceable.

IN WITNESS WHEREOF, Volunteer has executed this Agreement as the day and year first above written.

PARTICIPANT:

Print Name _____

Signature _____ Date: _____

PARENT OR LEGAL GUARDIAN

Print Name _____

Signature _____ Date: _____