Anne Arundel Community College
Student Travel Agreement

Club: _____ Event/Activity: _____

Event /Activity Dates: _____ to _____ Off Campus Location: _____

Student Name: _____ _____ _____ Student ID _____
First Init Last

Home
Address: _____ E-mail: _____
Street

_____ _____ Cell Phone: _____
City, State Zip

Responsible College employee accompanying students _____ Cell _____

I _____ understand that I am representing Anne Arundel Community College, and agree to conduct myself in a proper and courteous manner at all times and to adhere to the Student Conduct Code contained in the College Catalog.

I hereby confirm that I agree to attend this conference/activity and understand that the college has made a considerable financial investment. I understand that if I should cancel, and a replacement is not found, I will be responsible for reimbursing the college all expenses incurred on my behalf.

I understand and agree that Anne Arundel Community College, its Board of Trustees, faculty, staff, agents and/or employees are not responsible for any injury, damage or loss incurred by the undersigned while traveling and/or participating in conferences/activities. I understand that I am solely responsible for my actions/inactions, at all times, while participating in conferences/activities to include, but not limited to, travel to and from the destination, during my participation in the activity and during any free and unsupervised time.

I hereby agree to and shall save and hold harmless Anne Arundel Community College, its Board of Trustees, faculty, staff, agents and employees, from any claims, actions, or judgments arising from my actions or inactions during my participation in conferences/activities.

I _____ hereby affirm that I have read this authorization to participate in travel and the Student Conduct Code prior to execution of this Authorization and I accept all responsibilities contained herein.

_____ _____ _____
Student Signature Date Parent/Guardian Signature (if student under 18) Date

Emergency Contacts (provide two, please print):

_____ _____ _____ _____
Name Relationship Day Phone Evening Phone

_____ _____ _____ _____
Name Relationship Day Phone Evening Phone