

SAN FRANCISCO COMMUNITY COLLEGE DISTRICT  
PARTICIPATION IN A CLASS/ACTIVITY PERMISSION,  
ASSUMPTION OF RISK, AND  
HOLD HARMLESS, INDEMNITY AND RELEASE OF LIABILITY

Student's/Volunteer's Name: \_\_\_\_\_ and Student ID \_\_\_\_\_ hereby requests permission to participate in the following college class/activity:

CRN# \_\_\_\_\_ SUBJECT: \_\_\_\_\_ INSTRUCTOR: \_\_\_\_\_

Class/activity description: \_\_\_\_\_

\_\_\_\_\_

THIS FORM IS AN IMPORTANT LEGAL DOCUMENT. READ IT CAREFULLY AND SIGN BELOW. COMPLETION OF THIS FORM IS NECESSARY IN ORDER TO PARTICIAPTE IN THIS CLASS/ACTIVITY. I UNDERSTAND MY DECISION TO TAKE THIS CLASS/ACTIVITY IS OPTIONAL AND VOLUNTARY.

**(1) Assumption of Risks:**

\_\_\_\_\_

PLEASE NOTE: California Code of Regulations, Section 55220, states in ~~part~~ all persons making the field trip or excursion shall be deemed to have waived all claims against the district or the State of California for injury, accident, illness, or death occurring during or by reason of the field trip or excursion. All adults taking ~~off~~ out-of-state field trips or excursions and all parents or guardians of minor students taking ~~off~~ out-of-state field trips or excursions shall sign a statement waiving such claims. I understand that this class/activity may involve excursions or field trips as defined by Section 55220 of the California Code of Regulation, and I agree to waive all such claims.

I/WE, THE UNDERSIGNED, HAVE READ, UNDERSTAND, AND AGREE TO ALL TERMS AND CONDITIONS OF THIS DOCUMENT

\_\_\_\_\_  
Signature of Student/Participant

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian (if student is under age 18)

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Date