



**M C K E N D R E E**  
**U N I V E R S I T Y**

## Release of Liability

I wish to participate in the MCAT program at McKendree University. I understand that my work will consist of contributing to community improvement projects. I understand and recognize that there exists the possibility and risks of bodily injury to me or damage to my property while participating in the program and traveling to and from my work and volunteer sites.

THEREFORE, for and in consideration of McKendree University allowing me to participate in this program, I hereby release, relieve, and hold harmless its trustees, offices, employees and representatives from any liability or claim of liability, including liability for bodily injury and property damage arising out of or in connection with my participation in the program, including my travel to, from, and around the location where I will be working.

Should any claim be asserted by any person as a result of acts attributed to me while participating in this program, I also agree to indemnify and hold McKendree University, its employees or agents harmless from such claims for damages, injuries and/or attorney fees and costs incurred in defense thereof.

I further authorize medical treatment by a licensed health care provider for illness or injury in the event I am incapacitated, unconscious or otherwise unable to make a decision regarding my own physical well being.

By signing below, I acknowledge that I have read this release of liability and I am signing it voluntarily.

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(Signature and Date)

If applicable:

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(Signature of Parent or Legal Guardian/ Date)