

Volunteer Passenger Waiver & Release of Liability Form

Activity:	Date(s) of Activity:
I,(print name), waive, University Students' Union, and its employees of action, or damage as a result of property losustained to myself as a passenger in a privat traveling to and from locations of the activity waiver and release to be legally binding.	s, from any claims, demands, costs, causes oss or damage, or personal injuries te vehicle during participation in or
Signature of Passenger	Date
Signature of Witness (witness must be at least 18 years	s old) Date
Printed Name of Witness	