



California State University, Long Beach
General Release of All Claims

In consideration of my participation in the voluntary, extracurricular activity described below, I hereby agree to assume all risk of any kind of injury or damage I may receive or sustain as a result of my participation, including property damage, personal injury or death. Accordingly by signing below, I hereby completely release and hold harmless and forever discharge the State of California; the Trustees of the California State University; California State University, Long Beach; Associated Students, Inc.; and each and every officer, agent, representative and employee of each of them, from liability or responsibility for any and all claims, damages, injuries, losses or causes of action that may result from or arise out of my participation in the described activities. I also understand and agree that this release shall be binding as against my heirs and assigns.

Field Trip, Voluntary or Extracurricular Activity: **AILOTT Conference**

Location: **CSU Long Beach**

Description of Event Activities: **Conference Workshops**

Types of Risks Involved with the Activity: **Personal injury or death. Personal property damage. Personal property loss.**

Participant Name (Please Print): _____

Participant Signature: _____ Date: _____

Emergency
Contact Name: _____ Phone# _____

Name of Parent of Legal Guardian (if under 18) _____

Signature of Parent
or Legal Guardian (if under 18) _____ Date: _____

Please email, fax, mail, or bring to AILOTT this form filled out and signed by each participant and their parent if under age 18. Feel free to contact us at the below number with any questions.

Anna Nazarian-Peters
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American Indian Student Services
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