



**NEW MEXICO JUNIOR COLLEGE**

**GENERAL CONSENT, WAIVER AND RELEASE**

As a condition of NMJC granting me permission to participate in the NMJC-sponsored activity or trip (identified below as the “Activity”), I, the undersigned student (and parent or legal guardian of any student under 18 years of age), by signing this General Consent, Waiver and Release, hereby acknowledge, agree and affirm the following:

1. I agree to participate in the Activity subject to all rules and requirements established by NMJC.
2. I understand that the purchase, possession, use, or distribution of alcohol or illegal/ prohibited drugs or other substances at any time during the Activity, and being under the influence of any such substance at any time during the Activity, is strictly prohibited by NMJC policy. I further understand that the prohibitions regarding alcohol apply regardless of whether I am of legal drinking age. I agree to abide by all NMJC policies regarding alcohol and drugs at all times during the Activity.
3. TO THE FULLEST EXTENT ALLOWED BY LAW, I, ON BEHALF OF MYSELF, MY HEIRS, SUCCESSORS AND LEGAL REPRESENTATIVES, (AND IN MY CAPACITY AS PARENT OR LEGAL GUARDIAN OF THE UNDERSIGNED IF APPLICABLE), HEREBY **FULLY RELEASE, DISCHARGE AND HOLD HARMLESS** NMJC AND ALL OF ITS EMPLOYEES, OFFICERS, FACULTY, VOLUNTEERS, BOARD MEMBERS AND AGENTS FROM ANY AND ALL INJURIES, DAMAGES, LIABILITY, CLAIMS, CAUSES OF ACTION, COSTS AND EXPENSES, INCLUDING ATTORNEYS’ FEES, (COLLECTIVELY REFERRED TO AS “DAMAGES”), I MAY SUFFER ARISING FROM, RELATING TO, OR WHICH MAY BE, OR AT ANY TIME HEREAFTER ARISE AS A RESULT OF PARTICIPATING IN THE ACTIVITY, REGARDLESS OF THE LEGAL BASIS FOR SUCH DAMAGES.
4. I understand that I am **WAVING AND RELEASING ALL POTENTIAL CLAIMS FOR DAMAGES**, whether such Damages are caused by the negligent acts or omissions of NMJC, its employees, officers, faculty, volunteers, board members and agents.
5. I have read, understood and agree to this document.

Student Name (Print): \_\_\_\_\_ Age \_\_\_\_\_

Date(s) and Description of Activity: 8-18 through 5-19 Transportation to and from shopping and housing activities in Hobbs and surrounding areas.

\_\_\_\_\_  
Student Signature Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian Date: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Emergency Contact during Activity: \_\_\_\_\_  
Name Phone