

JARVIS CHRISTIAN COLLEGE
Social Work Program
P.O. Box 1470, Hawkins, Texas 75765-1470

ASSUMPTION OF RISK AND RELEASE

The undersigned individual, a student at Jarvis, certifies that he/she is in good physical health and able to participate in the internship program provided for him/her at:

_____ {Agency} _____

The undersigned individual also understands that because of the possible risks involved in performing agency services at the program facility provided by the period {Date} **to** {Date} , that he or she should be covered during said period by a private medical, vehicle insurance, and liability policy and further that the Jarvis Christian College does not provided such insurance or otherwise indemnify the individual against injuries or other liabilities arising out of said internship program.

Therefore, the undersigned hereby assumes the risks and responsibilities involved in such participation and agrees to indemnify, defend, and hold harmless the internship agency, the Jarvis Christian College, or any person acting on its behalf, from and against any claim or demand for loss, liability or damage, including, but not limited to, claims for property damage, personal injury or death, by whomever brought, arising from any accident or incident arising out of or connected with his/her participation as of aforesaid, or growing out of caused by any other activities of the undersigned during such participation in said internship program.

Name of the Participant

Signature of Participant

Name of College Official

Signature of College Official

Title of College Official

Date