



LIABILITY RELEASE FORM WHEN WORKING IN THE FIELD AND/OR LAB

The undersigned, in consideration of being allowed to participate in programs which may include classes, field trips, laboratory work, or voyages on vessels owned and operated by Virginia Institute of Marine Science beginning on the ____ day of _____, 20____, continuing for a duration of one year from this date, does hereby release the School of Marine Science/Virginia Institute of Marine Science (SMS/VIMS) or the College of William and Mary from any and all claims for injury, death, or damages to self or property, which may result from, or occur in the course of, participation in programs, except to the extent that such injury, death or damages is caused solely by negligence of VIMS, its agents or employees.

The undersigned further understands and declares the participation in said program, trip or voyage is voluntary, and that there will be no compensation for them, nor will they create eligibility for, without limitation, such benefits as salary, wages or workers' compensation during or as a result of participation in those activities. This agreement extends only to the length of participation in the above mentioned activities, and is binding on the heirs, successors, and assigns of the undersigned.

I acknowledge my right to seek counsel prior to signing this release, and have voluntarily affixed my signature this ____ day of _____, 20____.

(Participant's Signature)

(Signature of Parent or Guardian if participant is a minor)

I give permission for my (my child's) picture to appear in informational and educational media.
_____ Yes _____ No