

RELEASE AND ASSUMPTION OF RISK AND PHOTOGRAPHIC RELEASE FORM

I, the undersigned, an FIC	student participating in a construction site visit, desire to visit the
following active construction project	. My visit to the construction site is scheduled to take
place on In consideration of FIU's agree	eement to allow me to visit the construction site, I do hereby
voluntarily release, discharge, waive and relinquish any an	nd all actions or causes of action for personal injury, property damage,
or wrongful death occurring to me arising as a result of	my Visit to the construction site, or any activities incidental thereto
wherever or however the same may occur.	
I, for myself, my heirs, executors, administrators, and assig	gns hereby release, waive, discharge and relinquish any action or causes
of action, aforesaid, which may hereafter arise for me and	for my estate, and agree that under no circumstances will I or my heirs,
executors, administrators, and assigns prosecute, present an	ny claim for personal injury, property damage, or wrongful death against
THE FLORIDA INTERNATIONAL UNIVERSITY BOA	ARD OF TRUSTEES, FLORIDA INTERNATIONAL UNIVERSITY
STATE OF FLORIDA, THE FLORIDA BOARD OF	GOVERNERS, and their respective officers, employees and agents
contractors, and/or other representatives.	
It is my intention by this instrument to exempt and relie	eve THE FLORIDA INTERNATIONAL UNIVERSITY BOARD OF
TRUSTEES, FLORIDA INTERNATIONAL UNIVER	RSITY, STATE OF FLORIDA, THE FLORIDA BOARD OF
GOVERNORS, and their respective office &, employees	s and agents, from liability for personal injury, property damage, or
wrongful death caused by negligence.	
I am fully aware of risks and hazards associated with my v	risit to the construction site and I am fully aware that there may be risks
·	e risks may include property loss or damage and/or illness, injury or
accident that may cause death, paralysis, mental incapacitat	
	ad this release and assumption of risk and understand all of its terms.
have been given an opportunity to ask questions about the significance.	nis waiver and I execute it voluntarily and with full knowledge of its
I hereby also give permission for myself to be photographed	d with still or motion pictures or both and/or have my voice reproduced.
I agree to the use of such photographs/voice repr	roductions for publicity and promotion purposes by FLORIDA
INTERNATIONAL UNIVERSITY, and I hereby waive all	l claims for further compensation for such use or for damages. I waive
any right that I may have to inspect or approve the finished	ed product or the copy that may be used in connection with the use of
such photographs/voice reproductions.	
FIU Student Name:	PID:
Signature:	Date:
2151141412.	