



**COOPERATIVE EDUCATION / INTERNSHIP
WAIVER OF LIABILITY**

I, _____, of the City of _____, County of _____, State of _____, for and in consideration of my participation in the scheduled work experience program (internship or cooperative education work term) sponsored by Butler Community College during the _____, 20____, semester and which I freely and voluntarily accept to participate, do hereby expressly agree and understand not to hold Butler Community College, its Board of Trustees, officers, administrators, employees, representatives, and/or other agents, and their heirs, successors, and assigns, liable in any way whatsoever for any injury, or damage, or loss of property sustained by me or persons other than myself, arising out of, or in connection with, or due to negligence, fault, or otherwise, during any part of my participation in the aforementioned program.

For the same consideration and without conflict with the foregoing, voluntarily and knowingly, I hereby release and discharge Butler Community College, its Board of Trustees, officers, administrators, employees, representatives, and/or other agents, and their heirs, successors, and assigns, both in their official and individual capacities, jointly and separately, from any actions, causes of action, claims, demands, damages, costs, and expenses on account of or in any way growing out of any and all loss of personal property or injury, as the result of any accident, delay, or irregularity which may be caused either in whole or in part by any defect in any vehicle, airplane, vessel, or negligent operation thereof and through any act, error, or omission, or default of any company or person, or by reason of the conditions or use of any real or personal property while I am en route to, or from, or participating in the trip or program or occasioned by it.

I further promise to bind myself and all my heirs, administrator, and executors to indemnify and forever hold harmless Butler Community College, its Board of Trustees, officers, administrators, employees, representatives, and/or other agents, and their heirs, successors, and assigns, against loss, damage, or expense from any and all claims, demands, actions, or causes of actions that may occur when en route to, or from, or participating in the trip or program or any activity relating to or occasioned by it.

I have read this release and understand all its terms and execute it voluntarily and with full knowledge of its significance.

Dated this _____ day of _____, 20____.

Student Signature

Parent or Legal Guardian
(If under 18 years of age)