

Archdiocese of Dubuque
Off-Site Event/Field Trip Waiver (Adult)



I, _____ (full name), agree on behalf of myself, my heirs, assigns, executors, and personal representatives, to hold harmless and defend _____ (School/Parish), Archdiocese of Dubuque, its officers, directors, agents, employees, or representatives associated with my participation in any and all school/parish field trip(s) from any and all liability claims, loss or damage arising from or in connection with my participation in the field trip(s.)

Signature _____ Date _____

Print name _____