

## Behavioral Contract for student organization travel participants.

This contract is to be placed on file with the Department Office at least 48 hours prior to trip departure. All information is considered confidential.

This contract is betweenITSA_	and
(ORGANIZATIO	ON NAME) (STUDENT NAME)
to attend the2025 USITCC Nationals	inSpringfield, Missouri_
(CONFERENCE NAME)	(LOCATION)
on <u>March 27-30, 2025</u>	·
(DATES)	
	med organization, I will conduct myself in a professional, safe resent well the organization, McCoy College and Texas State
I understand that this trip is a privilege that will b	e immediately revoked if I violate any of the following standards:
<ol> <li>I will arrive on time to all designated trave alternate transportation at my own expense</li> <li>I will abide by all Texas State University pathe conference location.</li> <li>I will be responsible for all damages cause</li> <li>I understand that any violation of the above standard my status within the student organization will</li> </ol>	to the advisor about the sessions I attended. I departures, and I understand I may have to seek I if I am not present at departure time. I policies, conference conduct rules, and laws of the land at
EMERGENCY CONTACT INFORMATION	<u>;</u>
Name:	Relationship:
Phone Number(s): Addr	•

By signing this form, I agree to the above stated conditions for participating in this organization trip and do hereby:

- 1. release, discharge and covenant not to sue the University, College, Advisors and each of them from any and all claims and liability arising out of ordinary negligence of releases or any other participant which causes the undersigned injury, death, damages or property damage;
- 2. understand that there is inherent danger in travel which I recognize and voluntarily assume. I voluntarily elect to accept all risks connected with my participation in this event. I have read this document. I understand it is a release of all claims. I understand and assume all risk. I voluntarily sign my name evidencing my acceptance of the above provisions.

Printed name:	Signature:	Date:
Phone Number(s):	Local address:	