



## EMERGENCY CONTACT INFORMATION

(sample: basic with liability form)

[Chapter Name]'s [Event] on [Event Date]

Attendee's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Chapter: \_\_\_\_\_

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Emergency Contact Person(s)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### (Chapter Name) – "Event Name" Liability Form

PLEASE READ: AGREEMENT AND RELEASE OF ALL LIABILITY

I understand that my attendance at the Phi Sigma Pi (Chapter Name) - ("Event") is at my own risk and that I will be responsible for my own actions and agree that:

- (1) My execution of this Agreement and Release of all Liability is a prerequisite for participation in the Event; and
- (2) Phi Sigma Pi National Honor Fraternity and the (Chapter Name) Chapter at (Location of Chapter) will not be liable to me or my legal or personal representatives for any claims, demands, injuries, damages, costs, actions or causes of action of any kind whatsoever arising out of, or connected with, my attendance at the Event; and
- (3) I forever release and discharge Phi Sigma Pi National Honor Fraternity and the (Chapter Name) Chapter at (Location of Chapter) from all claims, demands, injuries, damages, costs, actions or causes of action of any kind whatsoever arise out of or occur in connection with any injuries or damages, direct or indirect, known or unknown, resulting from the acts or failure to act, whether negligent or otherwise, of Phi Sigma Pi, its employees, agents, servants or volunteers; and
- (4) I understand that I am solely responsible for my health and safety, and I acknowledge that I am physically capable of participating in and completing this Event; and
- (5) I agree to allow Phi Sigma Pi National Honor Fraternity the use of my name and likeness in connection with any advertising or promotion of the Event (both past and future) worldwide in perpetuity in all forms of media now and forever known.

(6) I have carefully read this Agreement and Release of Liability and fully understand its contents. If I am under 18 years of age at the time of registration, my parent or legal guardian has completely reviewed this Waiver and Release, understands and consents to its terms, and authorizes my participation by his/her signature below.

I sign this release and indemnity agreement for myself, intending to be legally bound by the terms set forth above.

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<b>Print Name</b>	<b>Signature</b>	<b>Date</b>
Please Check One (Undergraduate <input type="checkbox"/> Alumni <input type="checkbox"/> Guest <input type="checkbox"/> )		

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<b>Parent/Guardian Print Name</b>	<b>Parent/Guardian Print Signature</b>	<b>Date</b>
(if participant is under the age of 18)		

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