

**Davidson County Community College  
Student Organization  
Request to Participate in an Off-Campus Trip, Event, or Activity**

Any group or organization wishing to sponsor a trip to an off-campus activity (conference, workshop, or special event) must register the trip with the Office of Student Life. The registration process involves submitting a completed registration form at least 5 working days in advance of the intended travel. A designated advisor (full-time or part-time college employee) must accompany students on off-campus trips. Each student and advisor participating in an off-campus activity or event must complete this form and give to his or her advisor. Advisors please return with the all the applicable signatures. If approved, the form will be returned for you to keep for the duration of the trip and then shredded.

**Student Organization Name:** \_\_\_\_\_

**Participant's Name:** \_\_\_\_\_

**Location of Trip:** \_\_\_\_\_

**Purpose of Trip:** \_\_\_\_\_ **Date of Trip:** \_\_\_\_\_

**Emergency Procedure:** In case of accident or illness, DCCC, through its leaders, will attempt to provide aid and arrange medical assistance if necessary. Please provide below a medical history including emergency contacts, doctor's name and phone number, and a list of any prescribed medication currently taking. This information will be kept confidential by the advisor and used only in case of an emergency.

**Emergency Contact:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Relationship to Student:** \_\_\_\_\_

**Physician's Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Known allergies (medication, food, etc.):** \_\_\_\_\_

**Other medical conditions (optional):** \_\_\_\_\_

**Current prescription medication:** \_\_\_\_\_

**Insurance Carrier:** \_\_\_\_\_ **Policy No.:** \_\_\_\_\_

**Code of Conduct Pledge:**

*I understand that my participation in a Davidson County Community College recognized student club or organization may reflect upon the College, even though I am not officially sponsored, endorsed, nor approved as an agent of the College, and I will abide by the College's Code of Conduct as outlined in the Student Handbook. As I participate in the activities which are a part of this trip, I will conduct myself in a manner that preserves the reputation of the college and the student organization I am representing.*

**Indemnification and Waiver of Liability Agreement:**

*I agree to and shall at all times save harmless and keep indemnified the College its successors, employees, agents, counsel fees, and against all loss and damages whatever, that shall or may at any time happen or result to said College, its successors, agents, employees, and assigns, for or by reason of my travel to and from, and participation in, this trip and this student club or organization.*

\_\_\_\_\_  
**Name (Print)**

\_\_\_\_\_  
**Signature**

For Office Use Only

**Approved? Yes** \_\_\_\_\_ **No** \_\_\_\_\_ **Reason** \_\_\_\_\_

**OSL Signature:**

**Date:**