

Student Services Office

K.L. Campus, University Road, Navrangpura,
Ahmedabad-380009, INDIA

Ph: +91- 79 -2630 2470 / 2740 Extn: 434,435,436 Fax: 91-79-2630 2075 Website: www.cept.ac.in

Email: studentservices@cept.ac.in

INDEMNITY FORM- INDIVIDUAL

Student Name _____ Code No. _____

CEPT Email ID _____ Contact No _____

Name of Program _____ Faculty of _____

Blood Group _____

THE FIELD TRIP

Course Title _____ Instructor _____

Term/Year _____ Field Trip Location _____

Field Trip Purpose _____

EMERGENCY CONTACT

Name _____ Contact No. _____

Relationship to Applicant _____

Address _____

I HEREBY GIVE MY CONSENT FOR ANY MEDICAL TREATMENT THAT MAY BE REQUIRED DURING MY PARTICIPATION WITH THE UNDERSTANDING THAT THE COST OF ANY SUCH TREATMENT WILL BE MY RESPONSIBILITY.

IN CONSIDERATION of the CEPT University permitting the Student to participate in the Field Trip, the Student, on behalf of himself or herself and his or her heirs, successors and personal representatives, hereby irrevocably and unconditionally agrees to be bound by the following:

a) DISCLAIMER: CEPT University, and/or any of its employees, affiliates and/or assigns shall not be responsible for any injury, including death, suffered by the Student and/or any other person, or for any loss or injury to property of the Student and/or any other person, at any time for any reason whatsoever.

b) RELEASE: The Student shall behave responsibly and take all appropriate precautions, and assume all risks in connection with the Field Trip. (S) he hereby releases CEPT University from any and all actions, causes of action, claims or demands of whatsoever kind and howsoever arising relating to the

Field Trip.

c) INDEMNITY: The Student does hereby covenant and agree with CEPT University that the Student will, at all times hereafter, indemnify and save harmless CEPT University, including its employees, affiliates and/or assigns and each of them from all suits, actions, causes of action, claims or demands of whatsoever kind and howsoever arising, which may be made or brought against CEPT University in any way arising out of the participation of the Student in the Field Trip or otherwise arising, including the costs of defending any such suits, actions or claims on a substantial indemnity basis.

By initialing, the Student acknowledges that (S) he has read and understands the above clauses (a, b, c).

Signature of Student

Date