



# SMITH COLLEGE

## WAIVER OF LIABILITY/PERMISSION/MEDICAL RELEASE FORM

This form is required for any student staying overnight in a Smith College residence. Please complete both sides of this form and bring it with you to campus. **You will not be allowed to stay overnight without this form, signed by a parent or your legal guardian.**

Name of student \_\_\_\_\_ Date of birth \_\_\_\_\_

**Are there any medical problems we need to know about to make your stay more comfortable?** *Please include this information on a separate sheet.*

Name of Parent/Guardian \_\_\_\_\_

Home address \_\_\_\_\_

Business Address \_\_\_\_\_

Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_ Cell \_\_\_\_\_

**Where can parent/guardian be reached while you are at Smith (if different from above)?**

I, parent, give permission for my daughter, the student participant named above (student), to visit Smith College from \_\_\_\_\_ (date of arrival) to \_\_\_\_\_ (date of departure).

I, student and parent, hereby release, indemnify and hold harmless Smith College, including Smith College, its trustees, employees, volunteer workers, students, agents and assigns from any and all liability, damage, claim of any nature whatsoever arising out of or in any way related to my/my child's participating in this visit to Smith. Participating in any activity is an acceptance of some risk of injury. I agree that my/my daughter's safety is primarily dependent upon her taking proper care of herself. Despite precautions, accidents and injuries may occur and injury and/or loss or damage to personal property may occur as a result of participation in this visit. Therefore, I assume all risks related to the activities. In case of an emergency and if we cannot be reached, I do hereby authorize a representative of Smith College to consent to any medical treatment or care deemed advisable. I am aware that that medical assistance cannot be provided by the college's health center and that no Smith employee or student may administer medication.

I, student and parent, have read and agree to comply with the Visitation Policy on the opposite side of this form. My signature below indicates that I have read, understood and freely signed this agreement. I expressly agree that this agreement shall be construed and enforced in accordance with Massachusetts laws, and I consent to the jurisdiction of said state. I agree that this waiver and release is intended to be as broad and inclusive as permitted under Massachusetts laws so that if any portion hereof is held invalid, the balance shall continue in full legal force and effect.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

## Smith College Visitation Policy

(Please print both sides of this sheet, fill it out completely and bring it with you to campus)

We are very pleased you are planning an overnight visit at Smith College. This is an excellent opportunity for you to explore daily Smith life. You may want to arrange to meet with a professor and/or coach while you are here. We hope that you will attend classes, talk to students and experience as many of the various academic, social and residential components of Smith life as possible during your stay.

**Please bring your own toiletries, towel, sleeping bag and spending money.**

You are scheduled to spend the night on \_\_\_\_\_. You should arrive at the Office of Admission at 7 College Lane by 4 p.m. Your host or another student will meet you.

The Office of Admission closes promptly at 4:30 p.m. If you absolutely must arrive after 4 p.m., you should be certain that both your host and the Office of Admission (1-800-383-3232) know when to expect you. You and your host should communicate directly about an exact place and time to meet.

If you are unexpectedly delayed and cannot call before 4:30 p.m., you can use the campus phone outside the Office of Admission to contact your host. You only need to dial the last four digits of the number.

Your host is \_\_\_\_\_.

She lives in \_\_\_\_\_.

Her phone number is (413) 585 - \_\_\_\_\_. Her E-mail is \_\_\_\_\_.

Your host will show you around her house, eat dinner and breakfast with you and answer your questions. You will be staying overnight in your host's room. She will invite you to attend classes with her, as well as any other activities she has planned **until noon of your departure date**. You should bring homework, as your host will probably have to spend some her time studying. Please remember that your host is not a caretaker. You are free to attend activities on your own or with other Smith students if you choose to do so, and it may be necessary for your host to leave you with other students at times. However, you may not switch hosts with other students or stay in another room without permission from the admissions office.

Smith requires that while you are a guest you assume the same responsibility for your own actions that Smith students have assumed. My signature below confirms that I understand this requirement and that I agree to assume this responsibility.

**I am aware that although Smith College has agreed to host me overnight, neither the Office of Admission nor any other office or personnel of Smith College will be supervising me at all times during my stay on campus. Visiting students, like enrolled students, are responsible for their behavior as adults within the expectations described below.**

**I am aware that participants in on-campus visitation programs are required to abide by Massachusetts state law and the student code of conduct that governs students enrolled at Smith College. I acknowledge that Massachusetts law prohibits all use of illegal drugs and prohibits the drinking of alcoholic beverage by persons under 21 years of age, and agree that I will not use or consume alcohol or illegal drugs while participating in my on-campus visitation**

**Further, I understand that any inappropriate behavior during my campus stay will be considered by the Office of Admission.**

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date