



# Rhodes College

—1848—

Dear Parent or Guardian:

This letter is to ask your permission to assess and/or treat your child in case of illness or a medical emergency. If the student is too ill to be treated on campus, he or she would be transported to the nearest emergency room. If this *does* meet with your approval, please sign this form and list any pertinent medical history. If this *does not* meet with your approval, please attach a letter outlining what you wish done in case of a medical emergency.

Rhodes College Student Health Center

## MEDICAL RELEASE FORM

**Please bring with you to the Office of Admissions when you meet your host. You will give the completed medical release form to your student overnight host.**

I DO \_\_\_\_\_ DO NOT \_\_\_\_\_ give permission for medical treatment for \_\_\_\_\_

(student's name)

to be administered by Rhodes College Student Health Center personnel or an emergency care facility in

the area during his/her visit to the Rhodes campus on \_\_\_\_\_

(dates)

### Please complete the following:

Allergic to what medicines: \_\_\_\_\_

Current medications taking: \_\_\_\_\_

Family physician: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Medical Insurance Company name: \_\_\_\_\_

Group Number: \_\_\_\_\_

Subscriber's name: \_\_\_\_\_

Pertinent medical history: \_\_\_\_\_

In case of an emergency, every effort will be made to reach the undersigned.

Emergency number where *undersigned* may be reached \_\_\_\_\_

Date: \_\_\_\_\_ Parent or Guardian: \_\_\_\_\_



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## OFFICE OF ADMISSIONS

### WAIVER, RELEASE AND INDEMNITY AGREEMENT FOR PROSPECTIVE STUDENTS

1. The undersigned is a Prospective Student (the Prospect) to Rhodes College (the “College”) who is visiting the campus. This visit may involve attending classes, participating in social events, taking meals and staying overnight in campus housing (the “Activities”). The College does not assume liability for the ordinary risks associated with such Activities. Accordingly, the College requires that the Prospect sign this General Waiver, Release and Indemnity Agreement.
2. \_\_\_\_\_, (Please Print Name) the Prospect, in consideration for representatives, hereby forever releases and discharges the College, its trustees, officers, faculty, staff, employees and agents (the “Released Parties”), from any and all liability arising out of the Prospect’s participation in the Activities, including, without limitation, liability for any claims or causes of action whatsoever arising out of any damage, loss, or injury (including death), to the Prospect or to property owned by or in the custody of the Prospect while engaged in such activities.
3. The Prospect, in consideration for being permitted to participate in the Activities, further agrees to assume the liability for, and indemnify and defend the College from, any and all claims or damages for any sickness, personal injury, death, property damage or any other loss that may arise, either wholly or in part, out of any negligent, intentional or other act or omission by the Prospect in connection with the Activities, including those claims or damages that may arise out of the joint or concurrent negligence of a third party, the Released Parties, or any of them.
4. In the event that the Prospect supplies any automobile in order to transport himself or others in connection with the Activities, the Prospect warrants that the Prospect has a valid automobile operator’s license and is covered by liability insurance then in force.
5. Neither the College, nor its program directors, faculty members, employees, nor other agents, assume any responsibility or liability for the personal conduct of Prospect. In the area of personal behavior, the Prospect understands that he/she is required to make personal decisions for which the College does not assume responsibility or liability.

\_\_\_\_\_  
Prospect’s Signature

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