Assumption of Risk and Release

I,		, an Eastern Michigan University (EMU)			
student who	resides at				
In considera	tion of my being	allowed to participat	te in an Internship at		
			(name of or	ganization)	
sponsored in	n part by the EM	U Political Science Ir	nternship/Co-Op Program, be	eing held	
from	to	in	(name of city/	/township),	
and fully un	derstanding and	appreciating the risks	s of injury which may result	from my	
travel and pa	articipation in thi	is event and accompa	anying activities, do hereby	voluntarily	
and knowing	gly recognize, ac	cept and assume this	risk and, further I do for my	self, my	
heirs, and pe	ersonal represent	ative, hereby agree to	defend, indemnify and hold	l harmless,	
release, and	forever discharg	e EMU, its regents, o	officers, employees, and ager	nts from and	
against any	and all claims, lia	abilities, demands, pe	ersonal injury, or death which	h may	
result from 1	my travel to and	from and participatio	n in this internship at		
		(name of organ	ization).		
IN WITNES	SS WHEREOF, I	have caused this "As	ssumption of Risk and Relea	se''	
statement to	be signed this _	day of	, 20		
Signed:					
Printed nam	e:				
(Signature o	f Parent/Guardia	in if student is under	18 years of age)		
` -			- ,		
Accepted by	Eastern Michi	igan University			
Title:			Date:		