Waiver, Release and Assumption of Risk Agreement

(To be completed by Educator)

I, ______________________ (Educator’s Name) representing ________________________ (School) acknowledge that ALL students participating have turned in a completed/signed Waiver, Release and Assumption of Risk Agreement (Consent Form) in order to participate in the Water Discovery field trip at the Chino Creek Wetlands and Educational Park and the Inland Empire Utilities Agency on ________________ (date). In addition, I also acknowledge that all students participating in the Water Discovery field trip on the date mentioned have turned in their respective Consent Forms completed and hence, I have turned all completed Consent Forms into an IEUA Water Discovery facilitator.

____________________________  ______________________
Name of Educator (Print)        Date

____________________________
Signature of Educator

Inland Empire Utilities Agency
A MUNICIPAL WATER DISTRICT

Chino Creek Wetlands
and Educational Park