
COVENANT NOT TO SUE
OFF-CAMPUS TRAINING AND PRACTICAL FIELD/HIGH RISK TRAINING

(1) AUTHORITY: Title 10, U.S. Code 23-1.

(2) PRINCIPAL PURPOSE(S): To release the U.S. Government, the host institution and the state in which said institution is located from liability for injury; death, or damages for JROTC cadets participating in voluntary off-campus training programs, practical field, and high risk training.

(3) ROUTINE USES: Normal personnel actions. Disclosures of information may be provided to proper authorities in actions regarding law enforcement, legal actions as a result of injury or death, and investigations of accidents resulting from such voluntary off-campus training, practical field, and high-risk training.

(4) MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION: Voluntary. Failure to complete form will disqualify JROTC cadet from participating in specific voluntary training exercises.

I _____, residing at _____
(Type or print full name) (Address) (City & State)

do hereby agree that in consideration for being allowed to participate in JCLC, conducted by **RCSD JROTC DAI** _____, and Army supervised activity, and whereas I am doing
(Name of JROTC Instructor Group)

so entirely on my own initiative, risk, and responsibility; and being fully aware of the risk adhering to this type of training, I hereby RELEASE AND DISCHARGE FOREVER, the United States Army, the State of Mississippi and _____ and all of its officers, agents, and employees, acting
(Name of School)

officially or from any and all claims demands, actions or causes of action, on account of myself OR on account of any injury to me which may occur from any cause during said activity or continuances thereof, and I do further covenant and agree to hold the said Government of the United States, State of Mississippi, _____ and all of its officers, agents, and employees, acting officially or
(Name of School)

otherwise, blameless for any and all damages which I may cause either intentionally or thru my negligence.

Typed/Printed Name of Parent or Guardian if
Participant is a Minor

Signature of Parent or Guardian if
Participant is a Minor

Relationship to Cadet

Date

Age/Period Covered

Signature of Cadet