Release of Liability, Acceptance, & Pledge Form



Resident Fu	III Name (Please Print):	House:
	RELEASE FROM LIABILITY AND S	TATEMENT OF VOLUNTARY CONSENT
Initial	considerations received by me, receipt of knowledge and conscious appreciation of described herein, including, but not limited to peculiar to this type of activity, and personal	uthern Scholarship Foundation and for other good and valuable which I hereby acknowledge, I, the undersigned, having actuathe particular dangers involved in activities and community living those risks involved in travel by bus, van or car, those risks that are liability regarding my possessions, do hereby voluntarily consent to am and assume any and all risks arising there from.
Initial	- · · · · · · · · · · · · · · · · · · ·	taken of me during my participation in said program as well as used in promotional materials for this program.
Initial	I do here by release Southern Scholarship F Directors from any and all liability related to n	oundation (SSF), its employees, and members of the SSF Board of ny participation in the SSF program.
	ACCEPTANCE OF THE SSF RESIDENT H	ANDBOOK & STUDENT CODE OF CONDUCT
Initial	I have read and understand the UPDATED S Conduct taking immediate effect.	outhern Scholarship Foundation's Resident Handbook and Code of
Initial	rules, and regulations described therein. I am	gations found in this handbook and agree to abide by the policies, expected to conduct myself in a responsible manner consistent with Student Conduct Code, the laws of the State of Florida, as well as
Initial	I give the Southern Scholarship Foundation p expectations.	ermission to contact my parents/guardians if I am not meeting those
	RESID	ENT PLEDGE
character he	ments and release SSF of abovementione Iping to create a positive community envir	know community starts with me . I acknowledge all of the d liability. I pledge to cultivate, promote, and model good onment for all. I am willing to teach and learn from others. It is an education is more than just scholarship housing It is an education
Signature:		Date:
Witness Sig	nature:	Date: