

# Release of Liability and Travel Eligibility Form

Name of Organization/Club: \_\_\_\_\_

Advisor Name: \_\_\_\_\_

*Name:* *Student Identification #:* *GPA (2.25 minimum)*


This is to certify that I have verified the eligibility of the students listed above.

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

