HUMBOLDT STATE UNIVERSITY

Center for International Programs · College of Extended Education and Global Engagement

Emergency Management Plan - Early Release Form

I,	am making the decision to leave the	
Name		
	program on	and take full responsibility for my actions.
Program Name	Dat	re e
University, Humboldt State University, Humboldt State University, and all claims, liabilities, suits, or of the State of California, Trustees of employees, auxiliaries, or other parameters.	ersity, its officers, agents, e damages, attorney's fees, o of The California State Univ articipants for injuries to m y. It is further understood	tate of California, Trustees of The California State mployees, auxiliaries, or other participants from any or costs incurred, and any claim I might have against versity, Humboldt State University, its officers, agents, by person, including death, or property damage, arising and agreed that this waiver, release, and assumption
Signature:		Date:
Name:		
Street address:		City, state, zip:
Phone:		Email: