



W. K . Kellogg
Biological Station
MICHIGAN STATE UNIVERSITY

Consent Form and Release

W.K. Kellogg Biological Station and W.K. Kellogg Forest

I wish to participate in the MSU Kellogg Biological Station (KBS), and W. K. Kellogg Forest Volunteer Services. I understand that there are risks inherent in any physical activity. I assume the risks and accept the consequences involved in my participation in the program.

I have been informed of the possible dangers of my participation in the program, and understand that a fuller explanation of the possible consequences is available upon my written request.

I understand that participation in this program is voluntary and I may withdraw at any point. I understand that participation may not benefit me directly in any way.

I hereby release W.K. Kellogg Biological Station, W.K. Kellogg Forest, Michigan State University, its Board of Trustees, employees, volunteers and students from any and all costs, claims, injury or illness resulting from my participation.

I acknowledge that, I understand the activities in which I will participate. I accept the rules and regulations set forth and I consent to participate in volunteering. I have been advised that I should look to my own insurance policy in case of injury.

I have read and fully understand this document.

Participant Signature: _____ Date: _____

MSU is an affirmative-action, equal-opportunity employer.