



**URBAN PLUNGE 2017: Mexico City**  
**SMU Catholic Campus Ministry**

October 6-10, 2017  
Registration Form

Deposit: \$100 *due Aug 31 to reserve spot*  
Total Cost: \$600 *due Sept 30 to attend*

Name: \_\_\_\_\_ Year: \_\_\_\_\_ Major: \_\_\_\_\_

Why you are interested in coming on Urban Plunge?

\_\_\_\_\_

Address (yours, campus or off campus): \_\_\_\_\_

\_\_\_\_\_

Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Emergency contact (Provide 2):

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name of Doctor and Insurance Information (Plan and Policy #):

\_\_\_\_\_

Are you Safe Environment Trained? (circle one): Y N

Any dietary needs? (Please be specific):

\_\_\_\_\_

PASSPORT INFORMATION (*Required to reserve spot*)

Name as Printed on Passport:

First:\_\_\_\_\_Middle:\_\_\_\_\_Last:\_\_\_\_\_

Date of Birth:\_\_\_\_\_Gender:\_\_\_\_\_

Passport Issue Country:\_\_\_\_\_Passport Number:\_\_\_\_\_

*By signing below I acknowledge that I have provided truthful information to the best of my knowledge, and that I intend to pay both the deposit and full cost of the trip in a timely manner. I understand that failure to pay full cost of the trip may potentially increase the burden of cost for my peers who choose to attend, as well as for SMU Catholic Campus Ministry. I agree to attempt to the best of my ability to be present for any planning and preparation activities related to the trip, and to begin intentionally praying for this mission work, the trip attendees, and the residents of Mexico City.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Thanks for signing up for Urban Plunge 2017!**

Participation is open to all SMU students.

If you have any questions, please contact Cody Barras at [cbarras@smu.edu](mailto:cbarras@smu.edu)

**RELEASE OF LIABILITY  
TO  
SOUTHERN METHODIST UNIVERSITY  
FOR  
CATHOLIC CAMPUS MINISTRY**

WHEREAS, \_\_\_\_\_ (hereinafter called "Participant")  
(print name of Participant)

has made a commitment with **CATHOLIC CAMPUS MINISTRY** to participate in **Urban Plunge 2017 in Mexico City, Mexico** on **October 6<sup>th</sup>—10<sup>th</sup> 2017** (hereinafter called the "Event"); and

WHEREAS, **CATHOLIC CAMPUS MINISTRY** desire to have Participant participate in the Event; and

WHEREAS, **CATHOLIC CAMPUS MINISTRY** have arranged for transportation to and from the Event which Participant may use if Participant desires;

NOW THEREFORE, FOR AND IN CONSIDERATION OF **CATHOLIC CAMPUS MINISTRY** allowing Participant to participate in the Event and to use the above described transportation, Participant agrees as follows:

1. If Participant is providing his/her own transportation during the course of the Event, Participant must provide his/her own automobile collision and liability insurance. IT IS UNDERSTOOD THAT PARTICIPANT MAY NOT BE COVERED BY ANY INSURANCE POLICY WHICH IS OWNED BY SOUTHERN METHODIST UNIVERSITY AND THAT PARTICIPANT PARTICIPATED IN THE EVENT AT HIS/HER OWN RISK.

2. That all terms and conditions contained in this agreement extend to and are obligatory upon the heirs, personal representatives, successors, family and assignees of the Participant.

3. That Participant will hold harmless Southern Methodist University, its Trustees, officers, employees, and agents, and **CATHOLIC CAMPUS MINISTRY**, its sponsors, officers, agents and representatives for lost or stolen property either personal or rental, and shall indemnify, defend, and hold harmless, the parties named herein against claims for lost or stolen rental property.

4. The terms of this agreement are to be governed by and construed under the laws of the State of Texas and shall be deemed to have been fully performed in Dallas, Dallas County, Texas.

5. **RELEASE:** Participant, in consideration for the permission to participate in the Event and with the intent of binding himself/herself, his/her spouse, if applicable, his/her heirs, legal representatives, and assigns, voluntarily and knowingly agrees to the following: PARTICIPANT RELEASES, INDEMNIFIES, DEFENDS, AND HOLDS HARMLESS SOUTHERN METHODIST UNIVERSITY, ITS TRUSTEES, OFFICERS, EMPLOYEES, AND AGENTS, AND **CATHOLIC CAMPUS MINISTRY**, ITS SPONSORS, OFFICERS, AGENTS, AND REPRESENTATIVES AGAINST ALL LIABILITIES, CLAIMS, SUITS OR DEMANDS FOR INJURIES TO HIMSELF/HERSELF, ANY OTHER PERSON, AND/OR PROPERTY RESULTING FROM OR GROWING OUT OF HIS/HER PARTICIPATION IN THE EVENT AND TRANSPORTATION TO AND FROM THE EVENT INCLUDING ANY ACTS OR OMISSIONS CONSTITUTING NEGLIGENCE BY SOUTHERN METHODIST UNIVERSITY, ITS TRUSTEES, GOVERNORS, OFFICERS, EMPLOYEES, OR AGENTS OR **CATHOLIC CAMPUS MINISTRY**, ITS SPONSORS, OFFICERS, AGENTS AND REPRESENTATIVES. PARTICIPANT HEREBY COVENANTS AND AGREES IN FURTHERANCE OF HIS/HER OBLIGATION UNDER THE TERMS OF THIS AGREEMENT AS ACCEPTED, TO DEFEND THE PARTIES RELEASED HEREIN BY AND THROUGH COUNSEL CHOSEN BY SOUTHERN METHODIST UNIVERSITY.

The terms of this Release of Liability are to be governed by and construed under the laws of the State of Texas.

**ACCEPTED AND AGREED:**

FOR: \_\_\_\_\_  
PARTICIPANTS PRINTED NAME

BY: \_\_\_\_\_ DATE: \_\_\_\_\_  
PARTICIPANT'S SIGNATURE

ADDRESS: \_\_\_\_\_

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Check List

- Deposit: \$100 *due Aug 31 to reserve spot*
- Registration Form: *signed and returned with deposit*
- Up-to-date Passport Information: *due Aug 31 to reserve spot* Must expire NO SOONER than April 10, 2018 (6 months from return date)
- Liability Release: *due Aug 31 to reserve spot*
- Safe Environment Training: *must be verified by Sept 30 to attend*
- Remaining Cost: \$500 remaining balance *due Sept 30 to attend*