



MENNO SIMONS COLLEGE

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MSC Travel Bursary Recipient Waiver Form

Traveler's Name: _____

Dates of Travel: _____

Destination(s): _____

Event: _____

Method of Travel: _____

As a recipient of an MSC Travel Bursary, I understand that I am traveling for my own educational and personal purposes, and not on behalf of Menno Simons College (MSC) or Canadian Mennonite University (CMU). I have carefully reviewed, identified, and considered the risks of attending this event and traveling to and from this destination and have decided to accept all risks involved, including but not limited to bodily injury or death, property damage, and other risks that may not be foreseeable. I assume full responsibility for risks associated with my travel and attendance at this event and I hereby waive, release, and discharge MSC and CMU from all actions, claims, and demands for personal injury and/or property damage that may occur.

TRAVELER'S SIGNATURE

DATE