

Planning Safe and Successful University Events

March 31, 2025



UNIVERSITY
OF WYOMING

Overview

Who

- Host (UW or Not)
- Attendees (UW, public, minors)

What

- Purpose
- Event Details (Transport, Activities, Food, Drink, etc.)

Where

- UW Main Campus
- UW Property Other than Main Campus
- Non-UW Property

Why

- Mandatory
- Voluntary

Who - Hosts



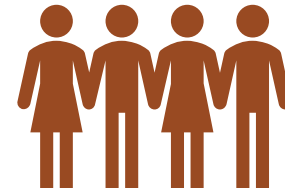
University

Colleges, Departments, Units

Advisory Boards

ASUW

4-H



Non-University

Private Groups or Individuals

Professional Associations

Students/Employees in Private Capacity

Schools (Lab School) and Governments

Other:

RSOs

Who - Attendees



- University
- RSO
- Public
- Minors

Accessibility and Events

Events open to the public must meet the requirements of UW SAP 4-5.3, Public Event and Program Accommodations (See https://www.uwyo.edu/regs-policies/_files/docs/policies/uw-sap-4-5.3-public-event-program-accommodations-sap-approved-3-16-22.pdf)

Event: A planned, organized public social activity or program sponsored by the University open to the University community AND/OR the public.

Step 1: Infuse accessibility into your current event planning process. Specifically, set aside monies to support accessible requests and identify a point person to facilitate accessibility and accessibility requests.

**What are Event &
Program sponsors
being asked to do?**

Step 2: Add the following statement to marketing materials:
“Guests or members of the public attending university-sponsored events or programs who would like to request disability accommodations are requested to reach out to Jane Doe at janeDoe3@Uwyo.edu.”

Step 3: Collaborate with DSS to facilitate accommodations.

Step 4: Continue to learn more about accessible event planning.

Minors on Campus Policy

Does not apply to:

- Public Events
- Events Requiring Parent/Guardian Attendance
- Public Services
- Enrolled Student Activities
- Academic Curriculum Activities
- Orientation, Campus Visits, etc.
- Patient/Client Care
- UW Early Care and Education Center
- Lab School
- Field Trips/Activities Supervised by the Minor's School or Organization

Minors on Campus Policy Requirements



Background Checks & Training



Ratios of Adults to Minors



No One-On-One Interaction



Submit Checklist

Sample Forms
or Substitutes



Non-University Host

Agreement
Indemnification
Insurance

What & Why

Activities (and Associated Risks)

- Physical exertion
- Exposure
- Confidential Information
- Sound (Reg 6-4)
- Food (Reg 6-4)
- Alcohol (Admin Policy)
- Photos (Institutional Communications Model Release)

Voluntary or Mandatory?

- Waiver or notice/acknowledgement
- Experiential Learning Forms

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UNIVERSITY OF WYOMING

RELEASE, ASSUMPTION OF RISK & AGREEMENT TO HOLD HARMLESS

I am aware that participating in _____ may be a dangerous activity involving A RISK OF INJURY ranging from minor injury to serious injuries such as paralysis or even death. I am aware that such an injury can limit my future life activities, including future earning capacity. Because of the potential dangers and risks, I recognize the importance of following instructions provided and I agree to follow all directions.

I hereby grant permission for the University to give or authorize emergency medical treatment, if necessary, and such action by the University shall be subject to the terms of this Agreement. I understand and agree that the University assumes no responsibility for any injury, damage, cost, or financial obligation that might arise out of or in connection with such authorized emergency medical treatment.

In consideration of the University of Wyoming, providing me with the opportunity to participate, I hereby assume all the associated risks and agree to hold the University of Wyoming, its trustees, officers, employees, agents, representatives, instructors, and volunteers and the State of Wyoming harmless from any and all liability, actions, causes of action, debts, claims, or demands of any kind and nature whatsoever which may arise by or in connection with my participation. The terms hereof shall serve as a release and assumption of risk for myself, my heirs, estate, executor, administrator, assignees and for all members of my family.

I acknowledge I have the right to consult an attorney or others regarding this document and I have read the document and fully understand the contents, consequences and implications of signing this document. I certify that I am at least 18 years old, I have the legal capacity to agree to this document, and signing the document is my own voluntary act.

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UNIVERSITY OF WYOMING

RELEASE, ASSUMPTION OF RISK
AND AGREEMENT TO HOLD HARMLESS

The University of Wyoming is providing transportation to _____(event) located in _____(location) on _____(dates). However, for my own personal benefit, I have decided to provide my own transportation for the event including transportation before and after the event. I understand and acknowledge that I am not required to provide my own transportation and doing so is wholly voluntary. I further understand that transportation of any kind can be dangerous and comes with a risk of injury.

I am hereby declining the transportation offered by the University of Wyoming and understand that I am fully responsible for anything that occurs during my self-provided transportation. I hereby assume all the risks associated with my self-provided travel and agree to hold the University of Wyoming, its trustees, officers, employees, agents, representatives, instructors, and volunteers and the State of Wyoming harmless from any and all liability, actions, causes of action, debts, claims, or demands of any kind and nature whatsoever which may arise by or in connection with such self-provided travel. The terms hereof shall serve as a release and assumption of risk for myself, my heirs, estate, executor, administrator, assignees and for all members of my family.

I have read the above statement and fully understand the contents, consequences and implications of signing this document.

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I recognize and understand the University of Wyoming is providing me transportation to and from the event and is arranging housing during the event and I am not required to provide my own transportation to or from the event and I am not required to arrange my housing. However, for my own personal benefit, I have decided to undertake the following arrangements on my own and without participation from the University:

- Self-Transport to the event
- Self-Transport after the event
- Self-Transport during the event
- Self-Transport before and after the event
- Arrange my own housing during the event

If I have marked self-transport above, I am hereby declining the transportation offered by the University of Wyoming, I recognize the increased risk that may be associated with self-transport and the need to find and maintain parking, and understand that I am fully responsible for anything that occurs during my self-provided transportation or my failure to arrive at a trip location at a designated time. I hereby assume all the risks associated with my self-provided travel.

If I have marked arranging my own housing above, I am declining the housing arranged by the University of Wyoming. I recognize the increased risk that may be associated with housing I am selecting and with staying apart from the University group. I agree to be at any designated location at the designated time to participate in group activities. I further acknowledge that by choosing to make my own housing arrangements it may require additional travel to and from my alternate housing location, and I accept the increased risk of injury or damage associated with my housing choice.

I hereby grant permission for the University and/or its employees or agents to give or authorize emergency medical treatment throughout the event, if necessary, and such action by the University shall be subject to the terms of this Agreement. I understand and agree that the University assumes no responsibility for any injury or damage, which might arise out of or in connection the decision to authorize treatment or with such authorized emergency medical treatment.

In consideration of the University of Wyoming providing me with the opportunity to

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UNIVERSITY OF WYOMING

ACKNOWLEDGEMENT OF RISK AND RESPONSIBILITIES

As part of my coursework in _____(class), I will be participating in experiential learning. In anticipation of this experiential learning, I acknowledge the following:

- Experiential learning provides an enhanced educational experience;
- Experiential learning contains risks above and beyond those inherent in traditional, classroom learning including, but not limited to, the following:
 - Risks associated with driving and other forms of transportation necessary to complete the learning;
 - Risks associated with visiting unfamiliar locations to conduct requirement activities (interviews, research, etc. **Program to insert activities**);
 - **(Program to insert other risks associated with program here)**
- If I will be driving as part of my experiential learning, I must comply with the University Vehicle Policy including requesting driving eligibility from the University.
- If I visit a home, business or individual residence, I am a guest there and will comply with any rules and be respectful of any reasonable customs or requests of the host. This is important for my safety, the reputation of the University, and the willingness of the host to accommodate future experiential learning;
- If I am scheduling activities with individuals I do not know, I will do so with the utmost concern and planning for my own safety including meeting in public places, with more than one individual present, or with other individuals aware of my plans;
- If I am scheduling a visit to a location conducting hazardous work, I may seek advice from my professor or other UW personnel with regard to ensuring safety during the visit.
- If at any time during an activity or visit off UW property I become concerned for my safety or the safety of any participant, I may end the activity or visit and consult my professor or other UW personnel for assistance.
- I hereby grant permission for the University to give or authorize emergency medical treatment if, in the opinion of the University personnel, it becomes necessary during the experiential learning. I understand and agree the University assumes no responsibility for any injury or damage that might arise out of or in connection with such authorized emergency medical treatment.

I understand that compliance with the above is critical to the success of the project and to my academic success. I understand that my failure to comply may lead to my personal responsibility for damage or injury to myself or others.

I, being an adult, have read the above statement and fully understand the contents, consequences and implications of signing this document.

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UNIVERSITY OF WYOMING
RELEASE, ASSUMPTION OF RISK & RESPONSIBILITIES
AGREEMENT TO HOLD HARMLESS

On a voluntary basis, not required for but related to my coursework in _____ (class/program), I have decided to participate in the experiential learning offered by the University of Wyoming. This experiential learning includes _____ (description of the learning, dates, etc.). In anticipation of this experiential learning, I acknowledge the following:

- Experiential learning provides an enhanced educational experience;
- Experiential learning contains risks above and beyond those inherent in traditional, classroom learning including, but not limited to, the following:
 - Risks associated with driving/riding in a vehicle and other forms of transportation necessary to complete the learning;
 - Risks associated with visiting unfamiliar locations to complete learning and/or conduct research;
 - Risks associated with participating in or visiting homes, businesses or other locations and completing unfamiliar tasks or processes;
 - Meeting with unknown individuals or groups;
 - ***(Program to insert other risks associated with program here)***

-----remaining risk language same as prior mandatory experiential learning form-----

I am aware that voluntary participation in this learning activity involves risks including, but not limited to, those identified above and can result in injuries ranging from minor injury such as scrapes and bruises to serious injuries such as paralysis or even death. I am aware that such an injury can limit my future life activities, including future earning capacity. Because of the potential dangers and risks, I recognize the importance of following all instructions. I understand that compliance with the above is critical to my safety, the success of the project and my academic success. I understand that my failure to comply may lead to my personal responsibility for damage or injury to others or myself.

I hereby grant permission for the University to give or authorize emergency medical treatment

-----remaining language same as voluntary event waiver-----

In consideration of the University of Wyoming providing me with the opportunity to participate, I

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Where



UW Main Campus

- 6-4 Buildings & Grounds
- 11-7 Union
- Facilities Use Agreements

UW Other Property

- Facilities Use Agreements

Non-UW Property

- Contracts (reservation forms)
- City/County Permits
- Insurance

Contacts

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