

Waiver Request

UNIVERSITY OF IDAHO
Office of Risk Management
PO Box 443162
851 Campus Drive AD209
Moscow ID 83844-3162
Phone (208) 885-7177, Fax (208) 885-9490
Email risk@uidaho.edu

Completed form must be received **two weeks in advance** of proposed activity/event. If you need assistance in completing this worksheet, please contact Risk Management at the above listed numbers.

College:	
Department:	
Class:	
Name of activity or event:	
Requestor Name:	
Requestor Email:	
Requestor Phone:	
Instructor or Advisor Name:	
Instructor or Advisor Email:	
Mailing and Physical Address Completed Waivers should be Sent to:	
Activity Details:	
Will there be minors?:	
Location:	
Method of Travel:	
Dates of activity, including travel:	
Total Group Size:	
Emergency Plan:	
Emergency Numbers:	