



**INDIANA UNIVERSITY**  
 OFFICE OF STUDENT ORGANIZATION ACCOUNTS  
 Bloomington

## STUDENT ORGANIZATION ACCOUNTS Vehicle Owner Acceptance of Responsibility Form

I, \_\_\_\_\_, am the registered owner of a:

Vehicle Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Registration Number: \_\_\_\_\_

State: \_\_\_\_\_

As the registered owner of the vehicle above, I understand and will adhere to the policies regarding travel identified by the SOA Office. I also acknowledge that Indiana University and the SOA Office does not provide insurance for the vehicle or its driver or occupants and are not liable for personal injury or property damage, including damage to the vehicle incurred during travel. As owner of the vehicle, I understand that I may be exposing myself to personal liability in the event of an accident.

With the foregoing understandings, I voluntarily undertake the use of the above vehicle for travel of the \_\_\_\_\_ Club for the \_\_\_\_\_ trip. Should any of the above information change during the year, I agree to update the information by submitting a new form to SOA, FRANKLIN 002.

I release and fully discharge the University from all liability in connection with the use of my vehicle for club travel for or on account of any injury to or illness of my person or death, or that of any passenger in my vehicle, or for or on account of any loss or damage to any personal property or personal effects owned by me or any passenger.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_