

## **Student Travel**

## **Release and Assumption of Risk (International)**

Whereas, I	a faculty member, staff member, student	t, community
member, or minor child (circle 1) (referred to herein as "I", "me", or the "Participant") contemplate participating in the		
Athens State University ("University") study abroad program in		
("Activity") during the time period of	to	and

**Whereas** my participation is voluntary, and in the event the activity is for academic credit, I acknowledge that Athens State University has offered an alternative means of receiving academic credit in lieu of participating in the Activity; and

Whereas I have had the opportunity for discussion with University personnel about conditions expected in the locale and I have consulted the Center for Disease Control (CDC) and U.S. Department of State web sites (http://www.cdc.gov/travel and https://travel.state.gov/content/travel/en/international-travel.html; and

Whereas I understand the University has contracted with	(Program Partner)
to conduct this Activity and I have received and reviewed all required documents including: medical re	eports, insurance
program information, student code of responsibility, student code of conduct, alcohol and drug policy	, information
technology policy, sexual harassment policy, crisis management plan and safety information, etc. I un	derstand that
(Program Partner) provides: housing arrangements, 24/7 emerg	gency support,
crisis management, Department of State registration, mandatory health insurance provided by	
including accident/sickness and medical/security evacuat	tion and
repatriation;	



Now therefore, in consideration of my being offered/allowed the opportunity to participate, I agree as follows:

- 1. I voluntarily and willingly agree to participate in the Activity, and represent that I am medically fit to engage in the Activity and travel. I further agree voluntarily to assume all risks including for accident, illness or damage to my person or property arising from or relating to the Activity.
- 2. I acknowledge the Activity may substantially increase my risk of personal and/or bodily injury including death and property loss or damage, including but not limited to those resulting from: kidnapping, criminal activity, terrorist attacks, chemical or biological attacks, lack of access to health care, food or beverage contamination, unsanitary conditions, transportation irregularities, different standards of design that may not meet United States accessibility standards, safety and maintenance of buildings, public places and conveyances, language barriers or cultural differences, war or armed conflict, legal problems with visa or passport, natural disasters, and natural hazards posed by fauna, flora, animals, and insects. I understand that this is a non-exhaustive list of the many risks to which I may be exposed by engaging in the Activity. I have made my own independent investigation of these risks and voluntarily agree to assume them.
- 3. I, on behalf of myself, my heirs, successors and assigns, waive, release, acquit, forever discharge, indemnify and hold harmless Athens State University, its officers, directors, employees and agents, from and against any and all actions and claims for all types of injuries (including death), loss, damages, accidents, delays or expenses deriving from, arising from, related to, associated with or occurring during my participation in the Activity.
- 4. I understand that I am solely responsible for arranging all travel and accommodations in connection with my travel to the Activity and returning from the Activity, and I hereby represent that I rely voluntarily and at my own risk on the assistance or information, if any, provided by the University.
- I acknowledge and agree that I am personally responsible for all my visa, passport, public health and customs compliance, and that if I am not a U.S. citizen or permanent resident alien, reentry to the United States may not be automatic.
- 6. I agree that, in the event of an emergency, or in the interest of my safety and well-being, my family can be contacted, notwithstanding any requirement of law to the contrary.



- 7. For Students: I agree to pursue with diligence the course of study for which I register and to be an active participant in the Activity related to the course of study.
- 8. I agree to comply at all times with any directions of University and/or Program Partner with respect to the Activity, and will comply with University policies and procedures and Program Partner rules and instructions, as well as local laws and customs. I understand that there may be times during the Activity when I may engage in my own leisure time and travel, or choose not to engage in voluntary group activities (such as, for example, trips or tours to other regions and countries) (the "Independent Activities"), that I will not be under any form of supervision by the University and/or Program Partner during those times, and that I assume all risks arising from or relating to these Independent Activities. I hereby agree to waive, release, indemnify and hold harmless the University, its officers, directors, agents, and employees from and against any and all actions, claims, injuries, loss, damages, and expenses arising from or related to my (i) failure to cooperate with such directions, (ii) failure to comply with such policies, procedures, rules, or instructions, (iii) my misconduct, or (iv) Independent Activities. I acknowledge that the University will not provide for or pay for legal representation on my behalf if I am charged with a violation of local law.
- 9. I acknowledge and agree that the University and/or Program Partner may at any time terminate my participation in the Activity for any conduct which they consider to be incompatible with or obstruct the progress of the Activity in any way or conduct that represents a danger to myself or others. I specifically agree that if my participation in the Activity is terminated for this reason or any reason related to my misconduct, my consent is hereby given for immediate transportation home at my own expense with no refund of Activity charges. Additionally, I acknowledge that if my participation in the Activity is terminated for the course of study for which I register.
- 10. I agree that, should any provision or aspect of this agreement be found to be unenforceable, all remaining provisions of the agreement will remain in full force and effect.
- 11. I represent that my agreement to the provisions herein is wholly voluntary, and further understand that, prior to signing this agreement, I have the right to consult with an adviser, counselor, or attorney of my choice. I represent that I have fully disclosed all pertinent information to the University regarding my participation in the Activity and acknowledge that the University is not responsible for situations that may arise due to my lack of full disclosure.

12. This agreement represents my complete understanding with Athens State University concerning my participation in the Activity, supersedes any previous or contemporaneous understandings I may have had with the University on this subject, whether written or oral, and cannot be changed or amended in any way without written agreement.

Unless otherwise indicated below, I am at least 19 years old, have carefully read this document with the opportunity to consult an attorney if I wish. I understand and agree to be bound by it.

If Participant is under 19 years old, then a parent, ward, or legal guardian of the Participant (the "Parent") must complete the space below, and in such event, the Parent agrees to all of the above provisions on behalf of himself/herself and the Participant.

Signature of Parent of Participant, if the Participant is under 19 years of age

Printed Name of Parent of Participant, if the Participant

Date

Date

**Signature of Participant** 

**Printed Name of Participant** 

is under 19 years of age

Date

Witness Signature

**Printed Name of Witness** 

Witness Signature

Printed Name of Witness

Date

