Fairleigh Dickinson University
Study Abroad Assumption of Risk and Release Form for Students

Name of Participating Student:_____________________________________________________

Description of International Field Trip:__________________________________

Course Number and Name:________________________________________________________

Faculty Trip Leader:_____________________________________________________________

Destination(s):_______________________________________________________________

Date(s):_______________________________________________________________________

I am a student at Fairleigh Dickinson University ("FDU") and have chosen voluntarily to participate in the study abroad trip described above (the "Trip"). ("Trip" is understood to include all activities at destinations, and all travel to and from such destinations.) I was not required to participate in this Trip as a condition of receiving my degree. This agreement confirms my understanding of the following.

1. **Risks of International Travel; U.S. State Department Warning:** I understand that participation in the Trip and international travel involves risks not found in study at Fairleigh Dickinson University. These include without limitation risks involved in traveling to, from, and within international locations; foreign political, legal, medical, social and economic conditions; different standards of design, safety and maintenance of buildings, public places and conveyances; and local weather conditions. The country or countries to which I will travel may have health and safety standards that differ from those enjoyed in the United States, and I recognize that I may be subjected to potential risks, illnesses, injuries and even death. I have made my own investigation of these risks, understand these risks and assume them knowingly and willingly. INITIAL HERE_______

I also acknowledge that in working, living and traveling in cities abroad, I may experience problems associated with urban living, including increased crime, pollution, high population density or standards of living and health standards that are different from those to which I am accustomed in the United States. I acknowledge that it is my responsibility to take every precaution to safeguard my health and to protect my personal belongings from damage or theft. I acknowledge that FDU recommends that I never travel alone, particularly at night. Being alone, especially at night, may present additional danger to my safety and well being. INITIAL HERE_______

I understand that, although FDU has organized the Trip, it cannot eliminate all risks or guarantee my safety while I am abroad. I have read and understood all information on the U.S. State
Department website (http://travel.state.gov) about the country or countries to which I am traveling, including, without limitation, the U.S. Department of State Consular Information Sheet and the State Department Warning (if applicable). I also have reviewed the U.S. Centers for Disease Control health advisory information relating to travel abroad found at http://www.cdc.gov/travel, and any additional information available from the World Health Organization website (http://www.who.int/). With knowledge of this information, I have made the independent judgment to participate in the Trip. INITIAL HERE______

2. Health Insurance; Medical Care; Health and Safety Concerns: I understand that I am responsible for obtaining any recommended immunizations before traveling to my destination. I carry valid and current medical insurance and have a valid insurance identity card to bring. I have determined that this insurance is adequate to cover injuries or illnesses that I may sustain while participating in the Trip. I will be solely responsible for payment in full of all costs of medical care I may receive overseas. INITIAL HERE______

I am also aware that, during my participation in the Trip, I will be automatically enrolled in the AIG Assist Travel Assistance Services, which offers medical information and evacuation, emergency assistance including translation services, legal referrals, and general travel advice and is a supplement to, not a substitute for, health insurance. I have reviewed the information about AIG Assist. INITIAL HERE______

I authorize FDU to obtain appropriate health care for me in the event that I need it but am unable to obtain it for myself. I further agree to hold harmless and indemnify FDU for any and all actions taken by FDU to provide necessary emergency medical care to me during the Trip. I also understand and agree that if I experience serious health problems, suffer an injury, or am otherwise in a situation that raises significant health and safety concerns, then FDU may contact my parents or any other person whose name I have provided as my “emergency contact.” I understand that FDU ordinarily will not initiate such contact without first having a discussion with me. INITIAL HERE______

3. Standards of Conduct: I recognize that I assume an important personal obligation to conduct myself in a manner compatible with local laws and regulations; with FDU’s policies for student conduct (including without limitation those set forth in the Student Handbook and in any Trip- specific materials); with the policies of my host institution (if any); and with any instructions given by the Trip leaders. I promise to act responsibly and will become informed of, and will abide by, all such laws, regulations, policies and standards. I will comply with FDU’s policies, standards and instructions for student behavior. I agree that FDU has the right to enforce all standards of conduct described above. INITIAL HERE______

My behavior outside of scheduled class time or related functions is my responsibility and not that of the designated chaperone and/or course professor or the university. If my behavior is such that it disrupts the goals of the trip, the designated University authority in charge will make arrangements for my early departure back to the United States. I will incur any additional cost as a result of such a matter. INITIAL HERE______

4. Travel Arrangement: I understand that FDU does not represent or act as an agent for, and cannot control the acts or omissions of, any host family, employer, transportation carrier, hotel, tour
organizer or other provider of food, goods or services involved in the Trip. I must confirm departure and arrival times and locations with my study abroad leader. I understand my property is transported at my own risk. I understand that FDU is not responsible for matters that are beyond its control, and that it cannot warrant the safety or convenience of the circumstances under which I will be living or working. INITIAL HERE_____

**Itinerary:** I have been provided with an itinerary in advance and will adhere to the expectations of the itinerary. Under no circumstances will I deviate from the approved travel itinerary unless instructed by the designated chaperone or course professor. I will notify my study abroad leader of my itinerary whenever I leave the site for longer than one day. If I travel independently and arrive after the start of the program, I will notify my study abroad leader or Office of Study Abroad personnel and am responsible for all academic consequences such as lost class time and assignments. If I plan on traveling abroad prior to the official start of the university-sponsored trip or by extending my travel after the official end date of the university sponsored trip, I will inform the study abroad leader in advance. FDU is not responsible for any injury or loss I may suffer when I am traveling independently or am otherwise separated from any university-sponsored activities. If I become separated from the program group, for any reason, I will rejoin the group at the first opportunity, at my own expense. Students who deviate from the approved itinerary and travel independently do so entirely at their own risk and are not covered by the university's Emergency Travel Services insurance plan. The details of covered and non-covered expenses have been furnished to me in advance. All personal requests and expenses are my own financial responsibility. INITIAL HERE_____

5. **General Release:** Knowing the risks described above, I agree, on behalf of my family, heirs and personal representative(s), to assume all the risks and responsibilities surrounding my participation in the Trip. To the maximum extent permitted by law, I release, hold harmless and agree to indemnify FDU, and its officers, directors, faculty, staff, representatives, employees and agents, from and against any present or future claim, loss or liability for injury to person or property which I may suffer, or for which I may be liable to any other person, related to my participation in the Trip (including periods in transit to or from my destination), resulting from any cause, including but not limited to ordinary or gross negligence. INITIAL HERE_____

I certify that I am 18 or older. I have carefully read and freely signed this Assumption of Risk and General Release Form. I understand and agree that no oral or written representations can or will alter the contents of this document. I agree that this agreement shall be governed by the laws of the State of New Jersey, which shall be the forum for any lawsuits filed under or incident to this agreement or the Trip.

*This is a Release of Legal Rights – Read and Understand Before Signing*

Signed:_________________________________________________________ Date:____________________

Student Name (print):____________________________________________________________

If student is under age 18, the parent and/or legal guardian must sign below.
I, the undersigned parent and/or legal guardian of the student listed above (the “Student”), do hereby consent to his or her participation in the Trip. I, as the parent of the Student and on behalf of the Student, release, hold harmless and agree to indemnify FDU, and its officers, directors, faculty, staff, representatives, employees and agents, from and against any present or future claim, loss or liability for injury to person or property which I or the Student may suffer, or for which the Student may be liable to any other person, related to the Student’s participation in the Trip (including periods in transit to or from the Student’s destination), resulting from any cause, including but not limited to ordinary or gross negligence.

Signed:_________________________________________________  Date:_________________

Name (print):______________________________________________________________

Relationship:_____________________________________________________________