



## SIGNATURE REQUIRED ON THE BACK OF FORM

### GRADUATE RISKS, RESPONSIBILITIES AGREEMENT AND RELEASE

I have agreed to participate as a student in a study, research, or internship program administered by Colorado Seminary, which owns and operates the University of Denver, or any other program sponsor. I understand and acknowledge that my participation in the program is wholly voluntary. Colorado Seminary (hereafter referred to as "DU") has agreed to allow me to participate in the program, and I, in turn, have agreed to the terms of this agreement.

#### 1) Risks of Traveling Abroad

a) I understand and acknowledge that living in and traveling to and within, and returning from a country outside the United States involves inherent risks, dangers, and hazards not generally found at DU or otherwise in the United States, including, but not limited to: (1) air travel and all other types of transportation, including independent travel decisions to and from social, cultural and programmatic events, which could result in damage to property, injury to persons, or death; (2) political, legal, social, and economic conditions that are different than those applicable in the United States and that can change in an unpredictable manner; (3) differing standards of design, safety and maintenance of utilities, including computing facilities, buildings, public places and conveyances; (4) varying quality and availability of sanitation, housing, and medical care; and (5) the potential for loss of property, personal injury, or death due to war, terrorism, crime, civil unrest, kidnapping, illness, public health risks diseases, accidents, and/or violence. In addition, I understand and acknowledge that participation in certain dangerous activities may cause me to face an increased risk of injury or death.

b) I understand that the conditions affecting the risks associated with travel can change on a daily basis. I also understand that it is my own responsibility to keep informed of those conditions as they change from day to day. I am aware that applicable current travel advisories and travelers' health information issued by the U.S. Department of State and the Center for Disease Control information materials can be found at the following Internet site addresses, [www.state.gov/travel/](http://www.state.gov/travel/) and [www.cdc.gov/travel/index.htm](http://www.cdc.gov/travel/index.htm), and that I should consult and review this information before departure. Further, I have made my own investigation and I am willing to accept the risks, hazards, and dangers inherent in international travel and the activities included in the program.

c) I understand that I may experience treatment different from what I have experienced in the United States due to the customs and standards of the foreign countries and/or distorted stereotyped images that people of other countries may have acquired. I further understand that such treatment might be unexpected, inappropriate or even illegal if it were to occur in the United States.

d) I understand and acknowledge that DU does not represent nor act as an agent for, and cannot control the acts or omissions of, any host institution, host family, transportation carrier, hotel, tour organizer, or other provider of goods or services related to the program.

#### 2) Conduct While Traveling Abroad

a) I understand that each foreign country has its own laws and standards of acceptable conduct, including dress, manners, morals, politics, drug and alcohol use, and behavior. I will become informed of, and will abide by, all such standards and laws for each country to or through which I travel during my participation in the Program. I agree to conduct myself in a manner that is consistent with those standards and that will comply with those laws, along with the regulations and policies of my host university, as well as DU policies and procedures, including but not limited to, the DU Code of Student Conduct.

b) I agree that I will attend to any legal problems I encounter with any foreign nationals or the government of the host country or any country to or through which I travel during my participation in the program. I understand that DU is not responsible for providing any assistance to me under such circumstances. I also agree to reimburse DU for any expenses incurred or caused by me, including but not limited to expenses arising out of vandalism, damage to property, or theft.

c) I understand that DU may immediately and in its sole discretion discontinue my participation in the program if my conduct is unacceptable. I also agree that if DU takes such action, I will leave the program immediately; that I will receive no financial refund for any cost of the program and; that I will be solely responsible for all costs and expenses for my return travel.

#### 3) Health and Safety While Abroad

a) I understand that medical care available in countries outside the United States may not be equivalent to care to which I am accustomed and which is generally available to me. I have assessed my own medical needs and have made my own investigation into the medical care available at the location of the program and in countries through which I may travel while I am participating in the program. I represent and warrant that the medical care available is adequate to meet my needs and I am willing to accept any increased risks, hazards, and dangers to me in this regard.

b) I represent and warrant that I am and will be covered throughout the program by a policy of comprehensive health and accident insurance, which provides insurance for injuries and illnesses I may sustain or experience in my travels, and, more specifically, in the country that I will be living and/or traveling while on the program. This coverage includes hospitalization,

medical evacuation and repatriation. I understand that DU may deny or discontinue my participation in the program should I be found to lack the necessary insurance coverage.

c) I understand that DU has purchased a policy with International SOS. This is not a medical insurance policy and should not be taken as such. International SOS can help with medical evacuation and repatriation, but it is the student's responsibility to understand the limitations of this policy. This policy is only active during the time of the program and up to 48 hours after the end of the program. DU strongly encourages students to register on International SOS website all travel associated with the program as well as personal medical information. International SOS does comply with HERPA regulations.

d) I understand and acknowledge that DU is not obligated to attend to any of my medical or medication needs, and I assume and accept all such risks and responsibility. Should I request assistance from DU in these matters while participating in the program, DU may impose reasonable charges for such services.

e) In the event of a medical emergency where I am physically or mentally incapable of consenting to medical attention, I authorize DU to take any action deems reasonably necessary to protect my mental or physical health and safety, including but not limited to, placing me under the care of a doctor or in a hospital or any place for medical examination and/or treatment or returning me to the United States or to my home outside the United States, if such return is deemed necessary after consultation with medical authorities, and in such a situation. Should the need arise, DU is authorized to provide any personal and medical information on me to any health care provider. I agree to pay all expenses I may incur related to medical care, release, and return to my home; and I further discharge DU and its representatives from any liability for any such actions, including the cost and quality of such medical treatment and care.

**4) General Provisions**

a) I understand that, for any time I spend away from the program or participating in any travel or activity that is not a part of the program, I am responsible for my own safety, and I assume all risk and responsibility for such activities.

b) I understand that DU may cancel the program or any aspect thereof prior to departure; and, in DU's sole discretion to cancel the program or any aspect thereof after departure, requiring that all participants return to the United States or to their home outside the United States, if DU determines or believes that any person is or will be in danger if the program or any aspect thereof is continued.

**5) Release of Liability and Indemnification**

a) I understand and acknowledge that the DU is neither responsible nor accepts liability for matters that are beyond its control. Accordingly, I understand, agree, and acknowledge that DU is not responsible or liable, in whole or in part, for those matters, outside of its control, including but not limited to war, quarantine, civil unrest, criminal activity, public health risks, terrorism, weather, strikes, acts of God, bankruptcies of service and transportation providers, mechanical defects, and cessation of operations, which results in (1) sickness, disease, injuries (including death), accident; (2) losses, damages, expense, or damage to and lost property; (3) fare changes, dishonors of hotel, airline or vehicle rental reservations; (4) any delays or missed transportation connections; and (5) any other expense arising out of such matters.

b) I agree to indemnify and hold harmless DU, its Board of Trustees, its Study Abroad Office, its agents, affiliates, officers and employees, from any and all judgments, orders, awards, claims, causes of actions, damages, injuries, losses, costs and expenses, including, but not limited to, court costs and reasonable attorneys' fees, brought by or on behalf of me or any third party for damage to or loss of property, personal illness or injury, or death arising out of travel or my participation in the program, and which are not the result of the negligence or intentional acts of any of the released parties.

I have read and understand the above provisions and agree to be bound thereby.

\_\_\_\_\_  
Student Participant Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

**If the Student is less than 18 years old, the Students' parents or other legally responsible party must agree to the terms of this agreement, accept the responsibilities it imposes on the Student's behalf, and acknowledge such agreement by signing below.**

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

Please return this form to: