

ANDERSON UNIVERSITY TRI-S AGREEMENT AND RELEASE FORM

In consideration of my acceptance in Anderson University's Tri-S program, I hereby agree to the following:

Health and Safety

- Prior to travel, it is my responsibility to consult my family physician regarding immunizations or other precautions to protect against travel-related illnesses.
- If I have any physical or mental condition or I am taking a prescription medication which may require special medical attention or accommodation during the program, I will notify the Tri-S office or my group leader.
- It is my responsibility to be sure I am covered by a policy of comprehensive health and accident insurance that provides coverage for any injuries or illnesses I may experience during my travel. I will not hold Anderson University, its directors, or officers liable for any injuries, illnesses, claims, damages, charges, bills, and/or expenses I may incur related to health or accident issues while traveling through this program.
- I grant to Anderson University or any of its representatives full authorization to take any action deemed necessary to protect my health and safety at my expense, including, but not limited to, placing me under the care of a doctor or hospital for medical examinations and/or treatment, or returning me to the United States if such return is deemed necessary after consultation with medical authorities.
- I understand that participation in Anderson University's Tri-S program involves risks not found in study at the university. These risks include but are not limited to traveling to and within, and returning from, one or more foreign countries; foreign, political, legal, social and economic conditions; different standards of design, safety and maintenance of buildings, public places and conveyances; local medical practices and conditions; natural hazards; disease, illness and injury; and crime. I understand that these and other risks are further described in the U.S. Department of State Consular Information Sheet and Travel Warning for the country or countries to which I will be traveling (<http://travel.state.gov/travel/>). I acknowledge that I am aware of these risks, that the University has no control over these risks, and that it is my responsibility alone to take precautions to minimize such risks.

Programs and Travel

- I understand that Anderson University reserves the right to make changes to the program itinerary at any time and for any reason, with or without notice, and the university shall not be liable for any loss to me because of any such cancellation or change. Any additional expenses resulting from penalties assessed by airlines because of operational or itinerary changes are my responsibility. The university reserves the right to substitute housing of a similar category at any time. Specific room and housing assignments are at the sole discretion of the university.
- I agree that Anderson University may use photographs that may be taken of me during the period of my participation in the program for whatever purpose they see fit.
- I understand that Anderson University assumes no responsibility, liability, or expense for any delays, cancellations, fare changes, missed carrier connections, public health risks, accidents, illnesses, injuries, death, losses, damages, or negligence by any tour operator, airline or transportation company, hotel or other housing facility, food service, or any other service due to weather, strikes, acts of God, war, quarantine, civil unrest, terrorism, or any other reason not explicitly stated here.
- I realize that Anderson University cannot assume responsibility for any loss, disappointment, expense, or frustration resulting from my failure to follow instructions or obtain the required documentation including passport, visa, birth, and/or health certificates.
- I understand that Anderson University, at its sole discretion, reserves the right to cancel all or part of any program after departure, requiring that all participants return to the United States if the university determines or believes that any person is or will be in danger if the program is continued.

Conduct and Lifestyle

I understand that Anderson University reserves the right not to accept or retain me in the program at any time should my actions or behavior impede the operation of the program or the rights or welfare of another person. Similarly, if my conduct violates any policy, procedure, or lifestyle expectation statement as outlined in the Anderson University Student Handbook,

I understand that I may be required, at my own expense, to leave the program at the sole discretion of Anderson University's agents and representatives, and may be referred to the appropriate Anderson University officials for further disciplinary or other action. In such an event, no refund will be made for any unused portion of the program.

I acknowledge that my participation in this program is entirely voluntary. I acknowledge that I have read, understand, and will abide by each of the terms and conditions of this agreement. I realize that all deposit are nonrefundable and cannot be transferred to another person.

Signature _____ Date _____