Assumption of Risks, Release of Liability, and Hold Harmless Agreement

Name

Study Abroad Program:

PLEASE READ THIS DOCUMENT CAREFULLY. It affects any rights you may have if you are injured or otherwise suffer damages while voluntarily participating in the above-named study abroad program.

In consideration for my being permitted to accompany this study abroad program, I agree to the following:

1. **Assumption of Risks:** I understand that there are inherent and unavoidable risks in travel abroad. I assume, knowingly and voluntarily, the known risks and all other risks that could arise during my travel to, from, in, or around my site country.

2. **Important Websites:** I acknowledge that I have been provided with the website addresses for obtaining information on security, safety, and health for countries to which I plan to travel and that I am responsible for informing myself of this information. The websites are:
   - U.S. State Department: [www.travel.state.gov](http://www.travel.state.gov)
   - Centers for Disease Control: [www.cdc.gov](http://www.cdc.gov)
   - World Health Organization: [www.who.org](http://www.who.org)

3. **Orientation:** I understand that study abroad orientation is available to me, and I understand that it is my responsibility to attend.

4. **RELEASE OF LIABILITY:** I acknowledge that I understand that I do hereby, for myself, the members of my family and spouse if I am alive, and my heirs, assigns, and personal representatives if I am deceased, RELEASE, WAIVE, FOREVER DISCHARGE, AND COVENANT NOT TO SUE the State of Iowa, Board of Regents of the State of Iowa, Iowa State University of Science and Technology, and all their officers, faculty, or employees (hereinafter referred to as “RELEASEES”) whether accompanying the study abroad program or otherwise, from any and all claims, demands, actions, or causes of action on account of any injury to me or my property or on account of my death which may occur from any cause during the study abroad program, or any continuances thereof; and I do hereby expressly covenant and agree to refrain from bringing suit or proceedings at law or in equity or otherwise as provided by law against any of the RELEASEES on account of any and all such claims, demands, actions, or causes of action.

5. **INDEMNIFICATION:** I further AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASEES from any loss, liability, damage, or cost, including court costs and attorneys’ fees that they may incur due to my participation in the study abroad program.

IN SIGNING THIS ASSUMPTION OF RISKS, RELEASE OF LIABILITY, AND HOLD HARMLESS AGREEMENT, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing, understand it, and sign it voluntarily as my own free will; no oral representations, statements, or inducements apart from the foregoing written agreement have been made; I am at least eighteen (18) years of age and fully competent (if not eighteen, my parent(s) or guardian(s) agree with the terms of this document and sign it as such); and I execute this AGREEMENT for full, adequate, and complete consideration fully intending to be bound by its terms.

Spouse signature

Date

(Also serves as parental signature for minor child/children)

Return completed form to: SAEAC, 3224 Memorial Union, or fax (515) 294-7724.