



Last Name: _____	First Name: _____
IHP Program: _____	<input type="checkbox"/> Fall 20____ <input type="checkbox"/> Spring 20____ <input type="checkbox"/> Academic Year 20____-20____
Home Institution: _____	

**Health and Safety**

I, the undersigned, have agreed to participate in the International Honors Program (IHP), hereafter referred to as the "Program," offered in affiliation with World Learning/SIT. In consideration of IHP's agreement to permit me to participate in the program, the receipt and sufficiency of which is hereby acknowledged, I hereby agree as follows:

1. I understand that my participation is wholly voluntary. I certify that I am 18 years of age or older.
2. I have read and understood:
  - a) the Health and Safety section, found in the IHP Student Handbook and the Traveler's Health section of the Centers for Disease Control (CDC) website, found at <http://www.cdc.gov> and <http://www.cdc.gov/travel/>
  - b) the IHP Student Handbook
  - c) the U.S. State Department Consular Information concerning travel to, in and around my Program countries, found at [http://travel.state.gov/travel/cis\\_pa\\_tw/cis\\_pa\\_tw\\_1168.html](http://travel.state.gov/travel/cis_pa_tw/cis_pa_tw_1168.html)
  - d) the IHP Conditions of Participation (the "Conditions"), found at the Confirmation Materials page of the IHP website
  - e) the Safety Statement, found at the Confirmation Materials page of the IHP website at [http://www.ihp.edu/page/confirmation\\_materials/](http://www.ihp.edu/page/confirmation_materials/)
3. I understand and agree that I am responsible for complying with any recommended or required immunizations, precautions, and procedures set forth in the IHP Student Handbook, which will be sent electronically prior to the program start, the Health and Safety section of the IHP website, and the Centers for Disease Control website. I understand that I am responsible for complying with the Conditions, any recommended or required precautions and procedures set forth in the Travel Advisory, and the policies and procedures of IHP as communicated to me from now until my completion of the Program.
4. I have consulted with a medical doctor with regard to my personal medical needs. I have no physical or mental health-related problems which I have not disclosed to IHP.
5. I am aware of all applicable personal medical needs. I have arranged, through insurance or otherwise, to meet any and all needs for payment of medical costs while I participate in the Program. I recognize that the Program is not obligated to attend to any of my medical or medication needs, and I assume all risk and responsibility therefore. If I require medical treatment or hospital care, in a foreign country or in the United States, during the Program, the Program is not responsible for the costs or quality of such treatment or care; although the Program may advance funds for the treatment that must be reimbursed by me to the Program.
6. The Program may (but is not obligated to) take any actions it considers to be warranted under the circumstances regarding my health and safety. I agree to pay all expenses relating thereto and release the Program from any liability for any actions.



Student Name: \_\_\_\_\_

7. Although IHP has made every reasonable effort to assure students' health and safety while participating in the Program, there are unavoidable risks in travel overseas, including (a) those identified in the IHP Student Handbook, the Centers for Disease Control, Travel Advisory and the Conditions, and (b) those associated with strikes; civil unrest; terrorism; war; criminal activity; force majeure; political, legal, social and economic conditions; different standards of design, safety and maintenance of buildings, public places and conveyances; local medical and weather conditions; public health risks; acts of God; and other possibly dangerous conditions beyond the control of IHP. I am aware of, accept and understand the risks and dangers of travel to, in and around the countries on my itinerary. I hereby assume, knowingly and voluntarily, each of the risks described above and all of the other risks which could arise out of or occur during my travel to, from, in or around the countries on my itinerary.

8. I, individually and on behalf of my heirs, successors, assigns and personal representatives, hereby release and forever discharge each of the International Honors Program (IHP) and World Learning/SIT, their employees, agents, officers, trustees and representatives (in their official and individual capacities) (the "Representatives") from any and all liability whatsoever for any and all damages, losses or injuries (including death) I sustain to my person or property or both ("Losses"), or which any other person may suffer because of my conduct, including but not limited to any claims, demands, actions, causes of action, judgments, damages, expenses and costs, including attorney's fees, which arise out of, result from, occur during or are connected in any manner with my participation in the Program, any related or independent travel, including periods in transit to or from any country where the Program is being conducted, when I am traveling independently, on vacation, or am otherwise separated or absent from any Program-sponsored activities, any activities or excursions, irrespective of whether they are sponsored, supervised or controlled by IHP, by any host institution, host family, transportation carrier, hotel, tour organizer or other provider of goods or services involved in the program, except for such Losses as may be caused by the gross negligence or willful misconduct of Representatives. I hereby agree to indemnify and hold harmless the Program and Representatives from and against any Losses, including injury, loss, damage, accident, delay or expense.

#### 9. Standards for Conduct

- a) I understand that each foreign country has its own laws and standards of acceptable conduct, including dress, manners, morals, politics, alcohol and drug use and other behavior. I recognize that behavior which violates those laws or standards could harm IHP's relations with those countries and institutions therein, as well as my own health and safety.
- b) I understand that illegal drugs in any form are not tolerated. Laws state that possession or use of illegal drugs is punishable by fine, imprisonment, and/or deportation. I understand that students found using or possessing illegal drugs in any form are subject to immediate expulsion.
- c) I will comply with the Program's rules, standards, and instructions for student behavior. I waive and release all claims against the Program that arise out of enrollment or my participation in the program or losses which occur during a time when I am not under the direct supervision of the Program or that are caused by my failure to remain under such supervision or to comply with such rules, standards, and instructions.
- d) I agree that the Program has the right to enforce the standards of conduct described above, in its sole judgment, and that it will impose sanctions, up to and including expulsion from the Program, for violating these standards or for any behavior detrimental to or incompatible with the interest, harmony, and welfare of the Program, or other participants. If I am expelled, I consent to being sent home at my own expense with no refund of fees.



**Student Name:** \_\_\_\_\_

- e) I understand that in becoming a participant of IHP I am subject to the program rules and regulations regarding conduct, scholarship, and full participation in the program. I understand that if I am found in violation of these rules and regulations, I will be subject to disciplinary action up to and including expulsion from the Program.
- f) I accept responsibility for dealing with any legal problems I encounter with any foreign nationals or government of the host country. The Program is not responsible for providing any assistance under such circumstances.

**10. Publicity**

I hereby authorize and give full consent to the International Honors Program to publish all photographs, film, or video images and voices in which, I, the undersigned, appear while enrolled as an IHP student. I further agree that IHP may transfer, use or cause to be used, these materials for any and all IHP publications.

11. This Agreement and the Conditions of Participation represent the complete understanding with the International Honors Program responsibility and liability for my participation in the Program. This Agreement and the Conditions of Participation supersede any previous or contemporaneous understandings with IHP, whether written or oral, and cannot be changed or amended except in writing and signed by an authorized officer or agent of IHP. Should any provision or aspect of this Agreement or the Conditions of Participation be found unenforceable, all remaining provisions of the Agreement or the Conditions of Participation will remain in full force and effect.

Should there be any dispute concerning my participation in the Program that would require the adjudication of a court of law, such dispute or lawsuit must be filed only in a court in Suffolk County, Massachusetts or in the United States District Court for the District of Massachusetts, to the exclusion of any other court or jurisdiction. This Agreement and the Conditions of Participation shall be governed by the laws of the State of Massachusetts (without regard to its conflicts of laws rules).

12. I have shared the above information with those other parties responsible for payment or with related interest and understand that, before signing this Agreement, I have the right to consult with the advisor, counselor, or attorney of my choice.

\_\_\_\_\_  
**Student's Printed Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

I am the parent or legal guardian of the above student. I have read the foregoing release form (including such parts as may subject us to personal financial responsibility), and have reviewed the form with my son/daughter. I will be legally responsible for the obligations and acts of the student as described in this release form, and agree, for myself and for the student, to be bound by its terms including the release of any claim we may have against the Program (including for its negligence), and our indemnification of Program against claims, by other family members arising out of the enrollment or participation of the student.

\_\_\_\_\_  
**Parent/Guardian Printed Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**