

## **Travel Course/Program Participant Agreement**

l, (name)		agree to fulfill
all financial and tour	obligations while participating in the following	travel course/program:
(name of program) _		which will begin on
(date)	and end on <i>(date)</i>	

I understand and agree to the following course/program conditions:

As lawful consideration for my being permitted to participate in the travel course/program identified above, I agree to be bound by the provisions of this Course/Program Participation Agreement and to satisfy all travel course/program requirements, including completion of all required forms and payment of fees as described in the payment and refund schedule. Failure to complete required forms or make required payments may result in withdrawal from the program/course.

**RELEASE OF INFORMATION:** I give permission to the sponsoring department/division to verify with the Judicial Office and the Office of Student Records that I am not on disciplinary or academic probation, either of which may invalidate my eligibility for the travel course/program.

**PERSONAL CONDUCT:** I agree to conform to all applicable rules, regulations and policies of Salem State University, the travel course/program and the host location. I also agree to abide by policies governing student conduct, both academic and other, as published in the *Salem State Student Conduct Code*. I understand that the University has the right to withdraw a traveler from the course/program at any time because of any violation of such rules or any disruptive behavior, for failure to act in conformity with instructions reasonably given by persons managing or directing the travel course/program or leading its participants, or for conduct that could bring the course/program into disrepute or either the University or participants into legal jeopardy. Such decisions will be final and no refund will be made. I will not hold the University liable for any claims incurred by reason of my failure or refusal to conform to the requirements described in this paragraph. All expenses related to termination or withdrawal will be my responsibility.

**TRAVEL:** I understand that I will be traveling during the course/program by various modes of transportation including, but not limited to, plane, train, bus, van, boat or foot. I acknowledge and understand that in the event I choose to leave the group, become detached from the group, fail to meet a departure by plane, bus, train or other conveyance, or become sick or injured, I will bear all responsibility to seek out and reach the group at its next destination and will bear all added costs that I incur or cause others to incur related to my contacting and reaching, or failing to contact and reach, the course/program site. I understand that I am

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responsible for meeting the group at the time set by group leaders, and that the group is not obligated to wait for me should I arrive late. It is in my best interest to arrive at meeting locations early.

**PROGRAM CHANGES:** The course/program is described generally in the literature provided to the participants. I understand and agree that the information is descriptive only and that Salem State University and its employees reserve the right to make any changes in the published itinerary or activities if they deem it necessary or appropriate for the comfort, convenience or safety of participants or for the success of the travel course/program.

I agree to accept all responsibility for loss or additional expenses due to delays or other changes in the means of transportation, changes in other services or accommodations, sickness, weather, acts of God, labor strikes, currency conversion rates or any other unforeseen circumstances.

**HEALTH RISKS AND MEDICAL TREATMENT:** I acknowledge that I am solely responsible for any health risks that may be associated with international travel, and that the university is not responsible for such risks. The university encourages all travelers to obtain as much information as possible concerning the health and other risks associated with international or domestic travel. For international travel, see, e.g., <u>https://wwwnc.cdc.gov/travel</u> and <u>https://travel.state.gov/content/travel/en.html</u>

I will advise sponsoring department/division of any health issues the University and the trip leader should be aware of in order to ensure my safety and well being and complete the required Disclosure Form. (Health information will be held confidentially.) I authorize Salem State University trip leaders to secure emergency medical, dental or first aid treatment on my behalf if at any time they deem it necessary or appropriate. I agree to accept all financial responsibility for any such emergency treatment and, if the University deems it necessary, an early departure from the trip. If it judges it necessary because of a health emergency, Salem State University may provide me with funds to purchase a plane ticket to Boston; if it does so, I agree to reimburse the University within thirty days following my arrival in Boston.

**INSURANCE COVERAGE:** I understand that I am required to maintain an adequate policy of health insurance. If traveling outside the United States that policy must provide coverage internationally and should provide for coverage for medical evacuation and repatriation. I agree, upon enrollment in the travel course/program, to provide Salem State University with a copy of my health insurance card or other evidence showing that my health insurance provides coverage in the country(ies) to which I will travel in the travel course/program, and I hereby represent that my medical insurance provides international coverage of the kind described above. It is my responsibility to provide updated insurance information to the sponsoring department/division should I change health insurance coverage before departure.

The University recommends that each participant purchase travel insurance. It is my choice whether to make this purchase. I will be responsible for filing and negotiating all claims directly with the insurance company.

**GENERAL RELEASE AND WAIVER:** I expressly understand and agree to the following. I accept all risk of personal injury (including death) and property damage arising from my participation in the travel course/program. I hereby release and discharge Salem State University and its governing board, its officers, directors, employees and agents and any related or affiliated entities (collectively "Salem State University") from all claims and demands whatever that I may hereafter have for injuries (including death) or property damage resulting from participating in the travel course/program or its activities, including injury (and death) or damage caused in whole or in part by the negligence or other wrongdoing of Salem State University, and further including any and all liability for medical or hospital care. Without limiting the foregoing, I understand and agree that Salem State University can and will assume no liability for injury (including death), damage, loss, accident, or irregularity in connection with the services of any airplane, ship, motor coach, train, or other conveyance used in carrying out the arrangements of the travel course/program. (*For Employees: I understand this agreement is not designed to deprive me of my statutory protection under the Workers' Compensation Law, nor does it do so.*)

**LEGAL AND FINANCIAL RESPONSIBILITIES:** I understand that I must comply with the laws and appropriate cultural standards of conduct of the countries and regions I am visiting. I agree to conduct myself in a manner that will comply with the laws of each such country and the regulations of Salem State University. If I experience legal problems in the USA or internationally, including any problems, legal or other, with any foreign nationals or government authorities of the any country within which I travel as a participant in the travel course/program, I will attend to them personally with my own personal funds. Furthermore, I understand that I am soley responsible for any cost or liability incurred due to property damage or personal injury caused by my actions.

**PAYMENTS AND REFUNDS:** I will follow the payment plan as prescribed for the course/program. I understand that failure to make timely payments may jeopardize my participation in the travel course/program and that Salem State University reserves the right to cancel my enrollment and participation in the travel course/program if I fail to make any required payment in a timely manner.

**RESPONSIBILITY DURING FREE TIME:** I understand that any activity or travel in which I choose to engage outside of the prescribed itinerary or activities of the travel course/program will be at my expense and risk. Salem State University representatives may provide participants with information on destinations and activities, but their doing so does not constitute a representation by the University concerning the suitability for any purposes, or the safety of, travel to any such destination or engagement in any such activity. Salem State University does not allow any student or tour participant to rent vehicles or motorcycles while participating in a travel course/program.

**FAMILY INVOLVEMENT:** I am responsible for communicating travel details to my family members/significant others. Should an emergency arise, I authorize Salem State University, at its discretion, to share information regarding my health and safety with persons I have identified as emergency contacts.

**USE OF PHOTOGRAPHS OR WRITTEN REPORTS:** By participating in a travel course/program, I authorize reasonable use of my photographs and written comments by Salem State University. These photographs or written comments may be used for academic and promotional reasons, in print, catalogs and on the Salem State website.

Signature:	Date:	

Please return all completed travel forms to the approving vice president.