

MILLIKIN UNIVERSITY OFF CAMPUS PROGRAM INFORMATION FORM AND LIABILITY WAIVER

Program: _____ Term & Year: _____ 20____

PERSONAL INFORMATION

Name: _____ MU ID #: _____
Nickname _____ Date of Birth _____
Gender (circle) Male Female Place of Birth _____
Year studying abroad (circle) Fr So Jr Sr Citizenship _____
Major _____ Minor _____ Permanent Address: _____
Advisor _____
Campus Address: from _____ to _____
City _____ State _____ Zip _____
City _____ State _____ Zip _____
Home Phone (____) _____
Cell Phone (____) _____ Home Email Address _____
Campus Email Address _____

EMERGENCY CONTACT INFORMATION

1. Name _____ Relationship to you _____ Day Phone (____) _____
Evening Phone (____) _____ Email _____
Address _____
2. Name _____ Relationship to you _____ Day Phone (____) _____
Evening Phone (____) _____ Email _____
Address _____

CONFIDENTIAL MEDICAL INFORMATION

The following information is requested in order for us to be able to provide emergency or other needed assistance during the immersion. All this information will be kept confidential and only shared with Millikin's Public Safety and your Program Leader.

Are you currently being treated for any physical or emotional condition? Yes No
(If yes, please explain)

Please list any allergies: Will you be taking any medications? Yes No
(If yes, please list)

Do you have any dietary restrictions? Yes No
(If yes, please explain)

Please provide any additional health information that might be helpful to the program leaders:

Health and Accident Insurance Coverage is required of all participants in University Domestic Immersions. I will be covered by a health and accident insurance policy for the duration of my program as a participant in the above-named program. This insurance is provided through:

Insurance Company: Policy Number _____
Issued by the _____

Your Signature

Date

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I, _____, am a student at Millikin University. I have agreed to participate in Off-Campus Programs sponsored by **Millikin University** for school year _____. I understand and hereby acknowledge that my participation in the Program is voluntary. In consideration of being allowed to participate in the Program, I hereby agree as follows:

1) **INSURANCE** I hereby represent and warrant that I am and will be covered throughout the Program by a policy of comprehensive health and accident insurance that provides coverage for injuries and illnesses I sustain or experience abroad, and, more specifically, in the country in which I will be living and/or traveling while on the Program. By my signature below, I certify that my health insurance policy will adequately cover me while outside the United States; and, I absolve the University of all responsibility and liability for any injuries (including death), illnesses, claims damages, charges, bills and/or expenses I may incur while I am abroad. I agree to report to the University any physical or mental condition I have which may require special medical attention or accommodation during the Program at least thirty (30) days prior to departure.

2) **STUDENT'S WARRANTY OF FITNESS FOR THE PROGRAM** I represent and warrant that I am mentally and physically fit, capable, able and willing to participate in this Program and to be subjected to the potential inherently hazardous and dangerous activities without limitations. I will consult with my physician in regard to necessary immunizations and any other medical matters relating to my participation in the Program.

3) **CONSENT TO HEALTH TREATMENT**

If, during my participation in the Program, I become incapacitated or otherwise unable to provide consent to medical treatment and advance consent cannot be obtained from my family, I agree that emergency medical treatment may be performed when, in the opinion of competent medical personnel, my health or welfare will be adversely affected by any delay. In such event, I authorize the University's designated representative to grant permission for any necessary medical treatment.

4) **RELEASE OF UNIVERSITY LIABILITY AND RESPONSIBILITY**

I understand and acknowledge that the University assumes no responsibility or liability, in whole or in part, for any delays, delayed or changed departure or arrival times, fare changes, dishonors of hotel, airline or vehicle rental reservations, missed carrier connections, sickness, disease, injuries (including death), losses, damages, weather, strikes, acts of God, circumstances beyond the control of the University, force majeure, war, forcible military actions, quarantine, civil unrest, public health risks, criminal activity, terrorism, expense, accident, injuries, damage to property, bankruptcies of airlines or other service providers, inconveniences, cessation of operations, mechanical defects, failure or negligence of any nature howsoever caused in connection with any accommodations, restaurant, transportation, or other service or for any substitution of hotels or of common carriers beyond the University's control, with or without notice, or for any additional expense occasioned by any of the foregoing. If due to weather, flight schedules or other uncontrollable factors I am required to spend additional nights, the University will not be responsible for my hotel, transfers, meal costs or other expenses. My baggage and personal property are transported at my risk entirely. The right is reserved by the University, in its sole discretion, to cancel the Program or any aspect thereof prior to departure; and, in the University's sole discretion to cancel the Program or any aspect thereof after departure, requiring that all participants return to the United States if the University determines or believes that any person is will be in danger if the Program or any aspect thereof is continued.

5) **UNIVERSITY'S RIGHT TO MAKE PROGRAM CHANGES** I understand that the University, reserves the right to make reasonable 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 whatsoever to me by reason of any such cancellation or change. The University is not responsible for penalties assessed by air carriers that may result due to operational and/or itinerary changes, regardless of whether the University makes a flight or travel arrangement. Any additional expense resulting from the above will be paid by me. The University, reserves the right to substitute hotels or accommodations or housing of a similar category at any time. Specific room and housing assignments are within the sole discretion of the University.

6) **CODE OF CONDUCT** In conducting Travel Programs, the University makes a reasonable effort to provide for the welfare and safety of the participants. On many programs, the official representative of Millikin University at the site (such

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as a faculty member) will make such rules and regulations for the conduct of the participants as will reasonably safeguard the health, well-being, and safety of all such participants.

The University reserves the right to decline to accept or retain me in the Program at any time should my actions or general behavior impede the operation of the Program or the rights or welfare of any person. Similarly, if my conduct violates any policy or procedure of the University, which I hereby agree shall apply to my conduct while I am abroad, I understand that I may be required to leave the Program, and I may be referred to the appropriate Millikin officials for further disciplinary action.

I recognize that due to the circumstances of travel programs, procedures for notice, hearing, and appeal applicable to student disciplinary proceedings at the university do not apply. Student disciplinary action during travel programs is at the sole discretion of the Millikin University employees, agents, or representatives.

I understand and hereby acknowledge that I will be subject to discipline by Millikin University, as well as by any foreign institutions(s) I attend or in whose facilities I reside or learn in connection with the Program, if I violate either or both institution rules, policies or student conducts codes. I hereby consent to the jurisdiction of all such institutions (including Millikin), to discipline me, separately or cumulatively, for any instance(s) of misconduct which occur(s) during the Program or during my time abroad. I agree not to challenge in any forum or proceeding the authority or jurisdiction of Millikin University to discipline me at any time for my misconduct abroad, during or in connection with the Program or any travel related thereto. I also agree that I will (a) participate in all classes and scheduled activities unless ill, (b) show proper respect for dress and cultural codes in the countries visited (c) not buy, sell, or use illegal drugs at any time, and (d) not engage in abusive use of alcohol.

7) **LAWS** I shall abide by all US Law during the program.

8) **ASSUMPTION OF RISK** I understand that the countries that the Program may involve may have health and safety standards substantially below those enjoyed in the United States. I understand and hereby acknowledge that I have been made aware of the U.S. State Department Consular Information concerning travel to, in and around the Program's geographic location (<http://travel.state.gov/travel/>), that I am aware of and understand the risks and dangers of travel to, in and around this location, including but not limited to the dangers to my own health and personal safety posed by terrorism, crime, civil unrest and violence. I hereby assume, knowingly and voluntarily, each of these risks and all of the other risks that could arise out of or occur during my travel to, from, in or around the Program location.

11) **Form of Identification** I shall make every effort to keep my form of identification with me at all times. If my form of identification is lost, I shall take the necessary steps to have it replaced.

12) **RESPONSIBILITY FOR MISSED FLIGHTS/TRANSPORTATION** I shall be responsible for arriving at all scheduled program locations on time and with all necessary tickets and passports. I understand that if I miss airline flights or other scheduled transportation, I must then arrange my own transportation to the scheduled site, at my cost.

13) **LEGAL PROBLEMS** I acknowledge and understand that if I experience legal problems with any domestic offices, that I must attend the matter personally, using my own funds. The University does not guarantee what, if any, assistance it can provide in such circumstances.

14) **COMMON SENSE** I shall be responsible for acting prudently and exercising caution and common sense at all times.

15) **UNIVERSITY USE OF PHOTOGRAPHS, ETC.** I grant the University permission to reproduce and use for educational, promotional, or marketing purposes all photographs, videos, movies, or sound recordings taken of me during the time that I participate in the Program.

16) **ACKNOWLEDGMENT OF UNDERSTANDING** I hereby acknowledge that I have read, understand and will abide by each of the terms and conditions of this Agreement.

Dated: _____

Participant Signature

Name (Printed)