

For use in study abroad programs and other university-related international activities at the University of Missouri to document an accompanying non-enrolled participant. Each non-enrolled participant must complete this form. For additional information, please see the guidelines for non-enrolled participants in MU study abroad programs and university-related international activities.

PROGRAM INFORMATION

Program name: _____

Program location(s): _____

Name of program leader: _____

NON-ENROLLED PARTICIPANT INFORMATION

Name: _____

Date of birth (if less than 18 years old): _____

CONDITIONS OF PARTICIPATION & RISK AND RELEASE

Please review and sign the following statement that constitutes the conditions for accompanying an MU study abroad program or university-related international activity.

Conditions of participation

1. I understand that, as an individual accompanying an MU study abroad program or university-related international activity, my behavior (or that of my minor child) reflects on the study abroad program or university-related international activity and on the University of Missouri.
2. I understand that permission for me (or my minor child) to accompany the study abroad program or university-related international activity will be revoked if: 1) I (or my minor child) engage in actions endangering myself or others, or 2) my (or my minor child) conduct is considered to be detrimental or incompatible with the best interests and welfare of the program. If permission to accompany the program is revoked, I (or my minor child) agree to leave the program and return to the United States at my own expense.
3. I understand that I (or my minor child) am subject to the laws of the United States as well as the host country's laws and local laws, and agree to abide by those laws.
4. I understand that I (or my minor child) am required to comply with all applicable MU policies, rules and regulations.
5. I understand that I (or my minor child) am responsible for all expenses associated with my (or my minor child/ren) accompanying the study abroad program or university-related international activity, that these expenses cannot be incorporated into the program budget and that they cannot be part of any reimbursement request or invoice that is submitted to MU. I further agree that any non-refundable expenses for the cancellation of arrangements made on my (or my minor child's) behalf will be my sole responsibility.

6. I understand that MU reserves the right to cancel programs in the case of insufficient participation or for other reasons deemed appropriate. MU also reserves the right to make changes to the program (such as program leader) or alterations to the program's proposed schedule and itinerary.
7. I understand that my (or my minor child's) accompaniment of a study abroad program or university-related international activity must not impact the program or other program participants, and must not impair the operation and administration of group activities associated with the program or otherwise infringe on other program participants. I further understand that other program participants bear no responsibility for me (or my minor child) or my interests.
8. I understand that I (or my minor child) am required to enroll in the university-contracted health insurance coverage through GeoBlue. Information about how to enroll is available on the [International Center website](#).

Assumption of risks, release of liability and hold harmless agreement

In consideration of my being permitted to accompany this study abroad program or university-related international activity, 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 host country(s).
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. These websites are:
 - U.S. Department of State: travel.state.gov
 - Centers for Disease Control and Prevention: cdc.gov
 - World Health Organization: who.org
3. **Risks of study abroad or university-related international activities:** I understand that participation in the MU study abroad program or university-related international activity specified may involve risks. 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 and weather conditions. I have made my own investigation and am willing to accept these risks.
4. **Institutional agreements:** I understand that that university does not represent or act as an agent for, and cannot control the acts or omissions of, any host institution, host family, transportation carrier, hotel, tour organizer or other provider of goods or services involved in the program.
5. **Limits to university responsibility:** I understand that the university cannot:
 - Guarantee the safety of participants or eliminate risk from the environment of the study abroad program or university-related international activity.
 - Monitor or control all the daily personal decisions, choices and activities of individual participants.
 - Prevent participants from engaging in illegal, dangerous or unwise activities.
 - Assure that U.S. standards of due process apply, or provide or pay for legal representation for participants.

- Assume responsibility for the actions of persons not employed or otherwise engaged by the university, for events that are beyond the control of the university and its subcontractors, or for situations that arise from the failure of the participant to disclose pertinent information.
- Assure that home-country cultural values will apply on the program when they differ from those of the host country.
- Be responsible for injury or loss suffered when traveling independently or otherwise.

6. Health and safety:

- I have consulted with a medical doctor or Christian Science practitioner and the program coordinator with regard to my personal medical needs. There are no health-related reasons or problems that preclude my participation in this program.
- I understand that I am required to maintain insurance coverage that covers me overseas during the entire program. If I fail to maintain the required coverage, I recognize that the university is not obligated to attend to any of my medical or medication needs, and I assume all risk and responsibility. If I require medical treatment or hospital care during the program, in a foreign country or in the United States, the university is not responsible for the cost or quality of such treatment or care. I agree to promptly express any health or safety concerns to the program staff or other appropriate individuals.
- I understand that the university 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 university from any liability for any actions.

7. Standards of conduct:

- I understand that each foreign country has its own laws and standards of acceptable conduct, including dress, manners, morals, politics, drug use and behaviors. I recognize that behavior that violates those laws or standards could harm the university's relations with those countries and the institutions therein, as well as my own health and safety. I will become informed of, and will abide by, all such laws and standards for each country to or through which I will travel during the program.
- I will attend to any legal problems I encounter with any foreign nationals or host country governments. The university is not responsible for providing any assistance under such circumstances.

8. Program changes: The university has the right to make cancelations, substitutions or changes in case of emergency or changed conditions or in the interest of the program. I understand that the university's fees and program charges are based on current airfares, lodging rates and travel costs, which are subject to change. If I leave, there will be no refund of fees already paid. I accept all responsibility for loss or additional expenses due to delays or other changes in the means of transportation or other services, or due to sickness, weather, strikes or other unforeseen causes. If I become detached from the program group, fail to meet a departure bus, airplane or train, or become sick or injured, I will, at my own expense, seek out, contact and reach the program group at its next available destination.

9. Assumption of risk and release of claims: Knowing the risks described above, and in consideration of being permitted to participate in the program, I agree, on behalf of my family, heirs and personal representative(s), to assume all the risks and responsibilities surrounding my participation in the program. I hereby agree to release, hold harmless and indemnify the Curators of the University of Missouri, a public corporation, its

officers, employees and agents, and the individuals members of the Board of Curators, from and against any present or future claim, loss or liability to person or property that I may suffer, or for which I may be liable to any other person, during my participation in the program (including the period in transit to or from any country where the program is being conducted).

I have carefully read and understand this participation and release form before signing it. No representations, statements or inducements, oral or written, apart from the foregoing written statement, have been made. This agreement shall define my responsibilities relating to the program for which I have qualified at the University of Missouri and shall be governed by the laws of Missouri, which shall be the forum for any lawsuits filed under or incident to this agreement or the program.

Name (may be parent/guardian for minor child): _____

Signature: _____ Date: _____