

## STATEMENT OF UNDERSTANDING

**Please read each statement carefully and write your initials at the end of each one.** By agreeing to these conditions for participating in the Study Abroad Program, you understand and agree fully to the NWOSU academic and administrative regulatory policies.

1. I understand that I must be 18 years old or older to participate in any of NWOSU's study abroad programs.<sup>1</sup> \_\_\_\_\_
2. I understand the Study abroad Committee may contact my emergency contact(s) in case of an emergency that affects me or my program. \_\_\_\_\_
3. I understand and agree that I am subject to the following: a) Host country laws, b) NWOSU Student Code of Conduct. \_\_\_\_\_
4. I understand that behavior that is not in accord with these conditions of participation may result in disciplinary actions. \_\_\_\_\_
5. I understand that I am not allowed to have any guests, at any time, in my hotel room. \_\_\_\_\_
6. I am aware of the nature of the cost of the program and will guarantee that all financial obligations will be met. I must be prepared to provide sufficient funds to cover textbooks, supplies, personal expenses, and other related Study Abroad costs. \_\_\_\_\_
7. I understand that the Study Abroad Committee Member has the right to dismiss the student from the Study Abroad program at any time without cause. I understand I will be responsible for all financial obligations. \_\_\_\_\_
8. I understand that it is my responsibility to ensure that I have a cell phone that has an international calling plan in case of an emergency. \_\_\_\_\_
9. I understand that it is highly recommended that I obtain medical insurance in case of a medical emergency while traveling. \_\_\_\_\_
10. I understand that any required local currency is my responsibility to obtain. \_\_\_\_\_
11. I understand that it is my responsibility to ensure that I understand any customs declarations that must be made when entering or leaving a country. \_\_\_\_\_

I, \_\_\_\_\_, understand and I will abide by the conditions listed above.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

<sup>1</sup> Travelers that are 17 are allowed to participate with the approval of the Study Abroad Committee.

**Waiver of Liability and Hold Harmless Agreement for Trip(s) Including an Overnight Stay**

This is a legally binding release executed by \_\_\_\_\_ (participant) and delivered to Northwestern Oklahoma State University (NWOSU).

1. I, the undersigned, request to be allowed to participate in the Study Abroad

Program's activity/trip to: \_\_\_\_\_ on the

following dates: \_\_\_\_\_, 20\_\_\_\_\_.

2. I agree to abide by all NWOSU rules and regulations while participating in this trip. I have attended a student conduct briefing conducted by university officials and understand the NWOSU rules and regulations.

3. In consideration of the participant being permitted to participate in the study abroad trip, I release, waive, forever discharge, hold harmless, indemnify, and covenant not to sue together or individually or severally NWOSU, their officers, agents, employees, and any students acting as employees (releasees), and their heirs, successors or estates of said releases, from and against any and all liability for any harm, injury, damage, claims, demands, actions, causes of action, costs, and expenses of any nature which participant may have or which may hereafter accrue to participant, arising out of or related to any loss, damage, or injury, including but not limited to suffering and death, that may be sustained by participant or his or her property, whether caused by the negligence or carelessness of the releases, or otherwise, while participant is in, on, upon, or in transit to or from the premises where the activity, or any adjunct to the activity, occurs or is being conducted.

4. I have signed this release in full recognition and appreciation of the dangers, hazards, and risks of such activities, which dangers include but are not limited to transportation associated with activity, the hazards of traveling in a foreign country, accidents or illness in places without adequate or familiar medical facilities, strikes, war, terrorism, weather, sickness, quarantine, government restrictions or regulations, or loss, damage, delay, or expense arising from the use of any vehicle or services, or from the act or omission of any airline, bus, transportation, sight-seeing, hotel, or any other service or transportation company, firm, individual, or agency, or for any cause in connection with this activity, and which could include serious or even mortal injuries and property damage. I further attest that I have fully discussed aforementioned risks and hazards, and participant agrees he or she has individually assumed the risks involved with this activity as witnessed below.

5. I understand and agree that releasees do not have medical training or medical personnel available at the location of the activity or on the NWOSU campus. I understand and agree that releasees are granted permission to authorize emergency medical treatment, if necessary, and that such action shall be

subject to the terms of this agreement. I understand and agree that releasees assume no responsibility for any injury or damage or expenses which might arise out of or in connection with such authorized emergency medical treatment.

6. It is my express intent that this release shall bind the member of participant's family, spouse, estate, heirs, administrators, personal representatives, and/or assigns. Participant agrees to save and hold harmless, indemnify, and defend releasees from any claim by anyone arising out of participant's participation in the activity/trip.

7. In signing this release, participant acknowledges and represents that I have fully informed participant of the content of this release by reading it before signature, had ample time to seek and confer with legal counsel concerning its contents, and that I or we have reviewed it and understand what it means and that this release is signed as my own free act and deed. No representations, statements, or inducements (oral or written) have been made apart from those in this release. I state further that there are no health-related reasons or problems which preclude or restrict participant's participation in the activity, and that the participant has adequate health insurance necessary to provide for and pay any medical costs that may be attendant as a result of injury to the participant.

8. I further agree that this release shall be construed in accordance with the laws of the State of Oklahoma. If any terms or provision of this release shall be illegal, unenforceable, or in conflict with any law governing this release, the validity of the remaining portions shall not be affected thereby.

9. I acknowledge and agree that this is a limited supervised activity and that participants shall have unsupervised time to travel on their own abroad at their own risk and that I agree to hold harmless, indemnify, and defend releasees from any claim by anyone arising out of participant's unsupervised activities. Study tours and study abroad experiences are divided into in-class and out-of-class time. During in-class time the student's behavior will be in conformance with the same rules as on-campus activities; during out-of-class time, the student's behavior will conform with local laws and mores, with the additional factor that students must at all times behave in a manner that does not embarrass or bring discredit to Northwestern Oklahoma State University. Violating in-class behavior guidelines described in the code of student conduct, or out-of-class local laws or mores, or bringing discredit or embarrassment to NWOSU will result in the student being dismissed from the study tour or study abroad. Additionally, NWOSU reserves the right to terminate my further participation in the activity if it deems my conduct detrimental or incompatible with the interests, harmony, comfort, or welfare of the study tour as a whole. If my further participation is terminated, I understand that funds paid by me in connection with this activity shall not be refunded, and that expenses related to my early departure are entirely borne by me.

10. I agree the releasees in charge of this activity reserve the right to make cancellations, changes or substitutions in emergencies or changed conditions in the interest of the study tour group or study abroad student; to alter the cost prior to departure in order to meet unexpected changes in airline fares, lodging rates, transportation rates, international currency valuation, etc., and/or unexpected global events such as political unrest, acts of terrorism, natural disasters, etc. The announced fee, schedule and

rates are understood to be based on information available at the time the activity plans are made and are subject to change.

IN WITNESS WHEREOF, this release has been executed this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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Participant printed name	Signature
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Participant Phone Number	Participant Email Address

**EMERGENCY CONTACTS:**

1. Name: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_
  
2. Name: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

**STUDENT DOCUMENTS:**

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_

I, the undersigned, a notary public in and for the State and County aforesaid, do hereby certify that (name) \_\_\_\_\_, known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that (he) / (she) signed the said instrument as (his) / (her) free and voluntary act for the uses and purposes therein stated.

Given under my hand and seal the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

Commission #: \_\_\_\_\_

My commission expires: \_\_\_\_\_