

## Harvard-Organized International Field Trip

## Conditions of Participation and Assumption of Risk and General Release Form

## THIS IS A RELEASE OF LEGAL RIGHTS – READ AND UNDERSTAND BEFORE SIGNING

Name of Participating Student:
Description of International Field Trip:
Course Number and Name (if applicable):
Faculty Trip Leader:
Destination(s):
Date(s):

I am a student at Harvard University ("Harvard") and have chosen voluntarily to participate in the international field trip described above (the "Trip"). ("Trip" is understood to include all activities at destinations, and all travel to and from such destinations.) I was not required to participate in this Trip as a condition of receiving my degree. This agreement confirms my understanding of the following:

1. General Risks of International Travel; U.S. State Department Travel Advisory. I understand that participation in the Trip and international travel involves risks not found in study at Harvard. These include without limitation risks involved in traveling to, from, and within international locations; local political, legal, medical, public health, social, economic, and weather/climate conditions; disease outbreaks, including without limitation pandemic or endemic diseases; different capabilities of emergency response; different standards of design, safety, and maintenance of buildings, public places, and conveyances; and different standards of data privacy and information security. The country or countries to

which I will travel may have health and safety standards and protections for civil rights and liberties that differ substantially from those in the United States, and I recognize that I may be subjected to potential risks, illnesses, injuries, and even death. I have made my own investigation of these risks, understand these risks, and assume them knowingly and willingly.

I also acknowledge that in working, living, and traveling in remote areas and/or cities abroad, I may experience challenges such as delayed access to emergency services, insufficient communication networks, increased crime, pollution, high population density, or standards of living and health standards that differ from those in the United States. I acknowledge that it is my responsibility to take every precaution to safeguard my security and health and to protect my personal belongings and information, as well as any Harvard-owned equipment or devices I bring with me as part of the Trip (if applicable), and any non-public Harvard data or research information that I collect, store, or access during the Trip (if applicable), from damage or theft. I acknowledge that Harvard recommends that I never travel alone, particularly at night. Being alone, especially at night, may present additional danger to my safety and wellbeing.

I understand that, although Harvard has organized the Trip, it cannot eliminate all risks or guarantee my safety while I am abroad. I have read and understood all information on the U.S. State Department website (<a href="https://travel.state.gov">https://travel.state.gov</a>) about the country or countries to which I am traveling, including, without limitation, the U.S. Department of State Consular Information Sheet and the State Department Travel Advisory and Alert(s) (if applicable). I also have read and understood the U.S. Centers for Disease Control and Prevention health advisory information relating to travel abroad found at <a href="https://www.cdc.gov/travel">https://www.cdc.gov/travel</a>. Finally, I have read and understood any applicable export control policies and procedures for the country or countries to which I am traveling to or through, and for the United States, including without limitation with respect to any medications, controlled substances, research data, scientific equipment, electronic devices, and biological samples I may be carrying or shipping. With knowledge of this information, I have made the independent judgment to participate in the Trip.

**2.** Health Insurance; Medical Care; Health and Safety Concerns. I understand that I am responsible for obtaining any recommended immunizations before traveling to my destination. I carry valid and current medical insurance and have a valid insurance identity card to bring. I have reviewed my coverage and have determined that this insurance is adequate to cover injuries or illnesses that I may sustain while participating in the Trip. I will be solely responsible for payment in full of all costs of medical care I may receive overseas.

I am also aware that, during my participation in the Trip, I will be automatically enrolled in the emergency international assistance and response program administered by International SOS, provided that I enter my information in International SOS MyTrips or the Assistance App, (unless I am told that my information will be entered on my behalf by a Harvard administrator). The assistance program for international travelers offers medical and security information and evacuation, emergency assistance including translation services, legal referrals, and general travel advice, and is a supplement to, not a substitute for, health insurance. I have reviewed the information about this program available at: <a href="https://www.globalsupport.harvard.edu/travel/emergency-support.">https://www.globalsupport.harvard.edu/travel/emergency-support.</a> However, I understand that

International SOS is bound by local governmental regulations and its ability to respond also may be limited in certain circumstances, such as, for example, an outbreak of disease or armed conflict.

I authorize Harvard to obtain appropriate health care for me in the event that I need it but am unable to obtain it for myself. I further agree to hold harmless and indemnify Harvard for any and all actions taken by Harvard to provide or obtain emergency medical care for me during the Trip. I also understand and agree that if I experience serious health problems, suffer an injury, or am otherwise in a situation that raises significant health and safety concerns, then Harvard may contact my parent(s)/legal guardian(s) or any other person whose name I have provided as my "emergency contact." I understand that Harvard ordinarily will not initiate such contact without first having a discussion with me.

- **3.** Cost. I understand that I will be responsible for all costs of the Trip beyond those covered by any award or financial aid that I may receive, as well as any additional expenses that I may incur during the Trip.
- **4. Standards of Conduct**. I recognize that I assume an important personal obligation to conduct myself in a manner compatible with local laws and regulations; with Harvard's policies and instructions for student conduct set forth in my School's *Student Handbook* and in any Trip-specific materials; with any other relevant Harvard policies, guidance and/or instructions; with the policies of my host institution (if any); and with any instructions given by the Trip leaders. I promise to act responsibly and will become informed of and comply with all such laws, regulations, policies, guidance, instructions, and standards. I agree that Harvard has the right to enforce all standards of conduct described above.
- **5. Risks of Particular Activities**. In addition to complying with all national/local/domestic travel restrictions or orders, including without limitation any requirements imposed during a health or other emergency, I agree not to engage in activities deemed by Harvard or commonly understood to be dangerous to individual safety. These include, but are not limited to, motorcycling, hitchhiking, driving or renting a car (unless, for graduate or professional students, the Faculty Trip Leader has determined that doing so is necessary for me to participate in the Trip), parachuting, bungee-jumping, hang-gliding, riding in private airplanes, rock climbing, whitewater rafting, scuba diving, and any other activity so designated by Harvard.
- **6. Travel Arrangements.** I understand that Harvard does not represent or act as an agent for, and cannot control the acts or omissions of, any host family, employer, transportation carrier, hotel, tour organizer, travel document services vendor, or other provider of food, goods, or services involved in the Trip. I understand that it is my responsibility to obtain the correct travel documentation, including, without limitation, passport, visa(s), and work permit(s), as applicable, and adhere to the entry and exit requirements of the country or countries to which I am traveling to and through. I also understand that Harvard is not responsible for matters that are beyond its control, and that it cannot warrant the safety or convenience of the circumstances under which I will be living or working.
- **7. General Release**. Knowing the risks described above, I agree, on behalf of my family, heirs, and personal representative(s), to assume all the risks and responsibilities surrounding my participation in the

Trip. To the maximum extent permitted by law, I release, hold harmless, and agree to indemnify Harvard, and its officers, governing board members, faculty, staff, representatives, employees, and agents, from and against any present or future claims, losses, liabilities, costs and expenses for injury to person or property, or for any other damage, which I may suffer, or for which I may be liable to any other person, related to my participation in the Trip (including periods in transit to or from my destination), resulting from any cause, including but not limited to negligence on my part or on the part of any of the released parties. However, I understand that nothing in this paragraph shall act as a waiver of any rights I may have under the Massachusetts Workers' Compensation Act.

I certify that I am age 18 or older. I have carefully read and freely signed this Assumption of Risk and General Release Form. I understand and agree that no oral or written representations can or will alter the contents of this document. I agree that this agreement shall be governed by the laws of the Commonwealth of Massachusetts (excluding its conflict of laws principles), which shall be the forum for any lawsuits filed under or incident to this agreement or the Trip.

Signed:	Date:
Student Name (print):	
Harvard College Residential House Affiliation (if appl	icable):
If student is under age 18, the parent and/or legal guar	rdian must sign below:
I, the undersigned parent and/or legal guardian of the sconsent to his or her participation in the Trip and in int of the Student and on behalf of the Student, release, ho its officers, governing board members, faculty, staff, reagainst any present or future claims, losses, liabilities, or for any other damage, which I or the Student may su other person, related to the Student's participation in the Student's destination), resulting from any cause, include Student or any of the released parties.	remational travel as part of the Trip. I, as the parent old harmless and agree to indemnify Harvard, and epresentatives, employees and agents, from and costs and expenses for injury to person or property affer, or for which the Student may be liable to any ne Trip (including periods in transit to or from the
Signed:	Date:
Parent/Guardian Name (print):	

## **EMERGENCY CONTACTS**

United States or home country:

First Contact	
Name:	Relationship:
Phone (home):	Phone (cell):
Email Address:	
Second Contact	
Name:	Relationship:
Phone (home):	Phone (cell):
Email Address:	