



**RELEASE AND WAIVER OF LIABILITY AND ASSUMPTION OF RISK**

**USF Health Program Name & Location:** \_\_\_\_\_

**Beginning and Ending Dates of Program:** \_\_\_\_\_

I understand that travelers who go abroad are subject to the hazards of various modes of transportation, forces of nature, acts or omissions of foreign governments, terrorism, war and insurrection, and illness. Likewise, I am aware of the unstable world conditions which might require changes in the program schedule, or cause inconvenience or even harm to me.

In consideration of the permission granted by the University of South Florida Board of Trustees, a public buy corporate (USF) to participate in the above program, I hereby assume the risk of inconvenience and harm and release the State of Florida, the State Board of Education, the Florida Board of Governors, the University of South Florida Board of Trustees and the University of South Florida, as well as the agents, employees, and members of the aforementioned from all actions, causes of actions, damages, claims or demands which I, my heirs, executors, administrators or assigns may have against any and all of the aforementioned for any and all personal injuries known or unknown which I have or may incur by participation in the above stated program and for all damages to my property.

By voluntarily agreeing to participate in this program, I certify that I am physically and emotionally capable of full participation. I realize that I am responsible for any injuries to persons or property that may be incurred as a result of my participation in this program.

The University of South Florida has not encouraged or provided me any incentive to participate I this program and has highlighted the inherent risks associated with this type of travel and activity.

The University of South Florida has the authority to establish rules of conduct necessary for the operation of the program during the entire period of the program, including free time. The use of illegal drugs during the entire period of the program is strictly prohibited. Should an official representative of the University decide that a participant must be separated from the program because of violation of stated rules, for disruptive behavior, or for any conduct that might bring the program to disrepute or its participants into legal jeopardy, that decision will be final. Separation from the program will result in the loss of all academic credit. Persons dismissed from the program will remain responsible for all program costs incurred on their behalf.

I acknowledge and understand that in the event that I fail to meet a departure, or become sick or injured, I will bear all financial responsibility and understand that I shall bear all costs attendant to contacting and reaching the international program site, or United States destination.

I expressly agree that the foregoing Release and Waiver of Liability and Assumption of Risk is intended to be as broad and inclusive as is permitted by Florida law and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I understand that the University of South Florida requires that I demonstrate that I have adequate medical and evacuation insurance for illness or accidental injury valid outside the United States in consideration of the University of South Florida's approval of my travel.

I, the undersigned, am at least 18 years of age. I have read this Release and Waiver of Liability and Assumption of Risk and understand all of its terms and recognize and accept any risk associated with the program and its conditions.

**IN WITNESS WHEREOF** I have executed this Agreement on the day and year first written below.

\_\_\_\_\_  
(Student's Signature) (Date) (UID#)

\_\_\_\_\_  
(Emergency Contact Name) (Relationship) (Phone #)