**Miami University**

**Study Abroad and Travel Program Companion Form**

For use in study abroad faculty-led credit programs at Miami University to document the accompaniment of non registered students, spouses/partners, and/or minor children of program directors, faculty, and staff.

This form includes two documents, *Conditions of Participation and Assumption of Risk and Release*.

For the complete policy statement regarding companions travel programs, please see *Statement Defining Participants in Miami University Study Abroad Programs*.

Name of Program Leader ____________________________________________________________

Workshop/Program _________________________________________________________________

Destinations ________________________________

Program Dates: Start ___________________________ End ___________________________

Name and relationship of individuals accompanying the study abroad program:

_____________________________________________________________________________

_____________________________________________________________________________

**Conditions of Participation**

Please review and sign the following statement that constitutes conditions for accompanying a Miami University study abroad or travel program.

1. I understand that, as an individual accompanying a Miami University study abroad workshop, my behavior (and/or that of my minor child/children) reflects on the program and on Miami University.

2. I understand that I (and/or my minor child/children) may have permission to accompany the travel program revoked if:
   a. I (and/or my minor child/children) engage in actions endangering to myself or others, or
   b. my (and/or my minor child/children) conduct is considered to be detrimental or incompatible with the best interest and welfare of the program.

3. If permission to accompany the travel program is revoked, I (and/or my minor child/children) agree to leave the study abroad program and return to the United States at my own expense.

4. I understand that I (and/or my minor child/children) am subject to the laws of the host country and institutions and agree to abide by those laws.

5. I understand that I am responsible for all expenses associated with my (and/or my minor child/children) accompanying the study abroad program and that these expenses cannot be incorporated into the program budget, and they cannot be part of any reimbursement request or invoice that is submitted to Miami University. I further agree that any non-refundable expenses for cancellation of arrangements made on my (and/or my minor child/children) behalf will be my sole responsibility.

6. I understand that Miami University reserves the right to cancel programs in the case of insufficient enrollment or for other reasons as necessary. Miami University also reserves the right to make changes to the program (such as program leader) or alterations in the program's proposed schedule and itinerary.

7. I understand that my (and/or my minor child/children) accompaniment of a study abroad workshop must not impact the workshop or other participants and must not impair the operation and administration of group activities associated with the study abroad program, or otherwise infringe on other program participants. I further understand that other program participants bear no responsibility for me or for my minor child/children or for my interests.

I have read and understand the conditions governing my accompanying Miami University travel program.

_____________________________________________________________________________

Signature

(Also serves as parental signature for minor child/children)

_____________________________________________________________________________

Date
MIAMI UNIVERSITY
Assumption of Risk and Release Form

THIS IS A RELEASE OF LEGAL RIGHTS -- READ AND UNDERSTAND BEFORE SIGNING.

Name:________________________________________________________

Date of Birth:______________________________________________
(If Applicant is under 18 years of age, a parent or legal guardian must also read and sign this form.)

Program:___________________________________________________

I hereby agree as follows:

1. **Risks of Study Abroad** I understand that participation in the Miami University Study Abroad Program specified above (the “Program”) involves risks not found in study at the University. These include, but are not limited to, risks involved in 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.

2. **Institutional Arrangements** I understand that the 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. I understand that the University is not responsible for matters that are beyond its control. I hereby release the University from injury, loss, damage, accident, delay or expense arising out of any such matters.

3. **Independent Activity** I understand that the University is not responsible for any injury or loss I may suffer when I am traveling independently or am otherwise separated or absent from any University-supervised activities. I acknowledge and understand that my participation in the Program is entirely voluntary.

4. **Health and Safety**
   
   A. I understand that foreign travel and living overseas can provide special challenges and stresses. Medical care, including mental health care, emergency medical care and medicine may not be as available and/or of a quality comparable to that available in the United States. Students with previous or current medical and/or mental health conditions are strongly encouraged to consult with trained medical and/or mental health professionals and to prepare strategies that may be used abroad should they experience problems. I acknowledge that I have been strongly encouraged to assess my ability to participate in the program and have done so.

   B. I am aware of all applicable personal medical needs. I have arranged, through insurance or otherwise, to meet any and all needs of payment for medical costs while I participate in the Program. 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 therefore. If I require medical treatment or hospital care, in a foreign country or in the United States, during the program, the University is not responsible for the cost or quality of such treatment or care.

   C. 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 of its actions or inactions.

5. **Standards of Conduct**

   A. I understand that each foreign country has its own laws and standards of acceptable conduct, including dress, manners, morals, politics, drug use and behavior. I recognize that behavior which
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.

B. I will also comply with the University’s rules, standards and instructions for student behavior. I
waive and release all claims against the University that arise at a time when I am not under the
direct supervision of the University or that are caused by my failure to remain under such
supervision or to comply with such rules, standards, and instructions.

C. I agree that the University has the right to enforce the standards of conduct described above, in
its sole judgment, and that it will impose sanctions, up to and including expulsion from the
Program, for violating these standards or for any behavior detrimental to or incompatible with
the interest, harmony, and welfare of the University, the Program, or other participants. I
recognize that due to the circumstances of foreign study programs, procedure for notice, hearing
and appeal applicable to student disciplinary proceedings at the University do not apply. If I am
expelled, I consent to being sent home at my own expense with no refund of fees.

D. I am solely responsible for any legal problems I encounter with any foreign nationals or
government of the host country. The University is not responsible for providing any assistance
under such circumstances.

6. Program Changes. The University has the right to make cancellations, 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 or am expelled from the Program for any reason, 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, other services, or 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.

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 myself, my family, heirs, and personal
representative(s), to assume all the risks and responsibilities surrounding my participation in the Program. To the
maximum extent permitted by law, I release and indemnify Miami University, and its officers, employees and
agents, from and against any present or future claim, loss or liability for injury to person or property which I may
suffer, or for which I may be liable to any other person, during my participation in the Program (including periods
in transit to or from any country where the Program is being conducted).

I have carefully read this Release Form before signing it. No representations, statements, or inducements, oral
or written, apart from the foregoing statement, have been made. This agreement shall become effective only
upon receipt of my application by Miami University and shall be governed by the laws of the state of Ohio, which
shall be the forum for any lawsuits filed under or incident to this agreement or to the Program.

X _________________________________ ______________________________
Signature Date