



## Study Abroad / Study Away Travel Liability Waiver

### General Rules

Individuals who wish to participate in Clackamas Community College Study Abroad Travel Programs must read and sign this statement which acknowledges their understanding of the liability issues surrounding international travel.

### Indemnification

Participant agrees to indemnify and release Clackamas Community College, its employees, elected or appointed officials against any loss or expense including attorney fees resulting from bodily injury, property damage, or personal injury arising out of any and all activities involved in the participant traveling outside the United States. This hold harmless and indemnification does not apply to gross negligence on the part of Clackamas Community College, its officials, or employees.

### Medical Insurance

Each participant is encouraged to purchase and/or maintain medical insurance covering accidental injury, dismemberment and/or death. Insurance should be provided on a worldwide basis and confirmation of such insurance will accompany this form. If participant declines from purchasing and/or maintaining medical insurance the College is indemnified and held harmless as per this travel waiver.

Each participant who is under the legal age must have a waiver signed by parent or authorized legal guardian. No exceptions will be made and travel will not be permitted without this signed release form. It is understood that Clackamas Community College is not responsible for lost or stolen personal property, airline delays, expenses, transfers or hotel accommodations.

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Program/Destination: \_\_\_\_\_

Student's Printed Name and Signature: \_\_\_\_\_//\_\_\_\_\_

Print name

Signature

Parent/Legal Guardian Signature (if student is under age 18): \_\_\_\_\_

Beginning and end dates of Clackamas Community College –Sponsored activity:

(Beginning date) \_\_\_\_\_//\_\_\_\_\_ (Ending date)

Medical Insurance:  Yes  No, but will purchase  Decline to purchase

Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

(Attach a copy of insurance card/information)

Name/Phone number of an Emergency Contact: \_\_\_\_\_

College Coordinator Printed Name/Signature: \_\_\_\_\_

Note: Clackamas Community College assumes neither liability nor responsibility of student's activities once the scheduled part of the trip has concluded and the students have been released on his/her own.