ACKNOWLEDGEMENT OF RISK AND GENERAL RELEASE FORM

FOR USE WITH DOMESTIC AND INTERNATIONAL TRAVEL (REVISED 9/7/2012)

THIS IS A RELEASE OF LEGAL RIGHTS
READ AND UNDERSTAND BEFORE PROVIDING YOUR ELECTRONIC SIGNATURE

“Stonehill” is understood to refer to the President and Trustees of Stonehill College and its officers, employees, agents, and instructors. I am a student at Stonehill and have applied for a Study Abroad or International Internship Program, collectively hereafter referred to as “the Program”.

I have chosen to undertake the Program voluntarily. I was not required to travel domestically or to a foreign country or countries as a condition of receiving my degree from Stonehill. This form confirms my understanding of and agreement with the following:

I understand that participation in the Program and travel involves risks not found in study at Stonehill. These include, without limitation, risks involved in traveling to and within, and returning from, domestic and international locations; foreign political, legal, medical, social and economic conditions; different standards of design, safety and maintenance of buildings, public places and conveyances; and local weather conditions. The location(s) to which I will travel may have health and safety standards that differ from those found at Stonehill College, 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 cities domestic and abroad, I may experience problems associated with urban living, including increased crime, pollution, high population density or standards of living and health standards that are different from those to which I am accustomed. I acknowledge that it is my responsibility to take every precaution to safeguard my health and to protect my personal belongings from damage or theft. I acknowledge that Stonehill recommends that I never travel alone, particularly at night. Being alone, especially at night, may present additional danger to my safety and well-being. Although Stonehill is providing funding and administrative assistance for the Program, Stonehill’s evaluation of the placement has been solely on its mission-related merits. And while Stonehill has conducted a review of the Program and has made a decision to engage in the Program, I understand that I must independently evaluate whether the Program will take place in a safe and secure environment by my own personal standards.

If applicable, I have read and understood the information on the State Department website at: http://www.state.gov/travelandbusiness about the country or countries to which I am traveling, including the U.S. Department of State Consular Information Sheet and the State Department Travel Warnings (if applicable). I have also reviewed the CDC health advisory information relating to travel abroad found at http://www.cdc.gov/travel.

I recognize that I assume an important personal obligation to conduct myself in a manner compatible with Stonehill rules and local laws and regulations, and promise to act responsibly and will become informed of, and will abide by, all such laws, regulations and standards.

I understand that Stonehill does not represent or act as an agent for, and cannot control the acts or omissions of, any host family, host employer, transportation carrier, hotel, tour organizer or other provider of food, goods or services involved in the Program. I understand that Stonehill 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, working or traveling.

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 Program. To the maximum extent permitted by law, I release, hold harmless and agree to indemnify Stonehill and its officers, directors, faculty, staff, representatives, 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, related to my participation in the Program (including periods in transit to or from my destination), resulting from any cause, including but not limited to ordinary or gross negligence.

I certify that I am age 18 or older. I have carefully read and freely signed this Acknowledgement 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 Program.