

## **Assumption of Risk, Release and Liability Waiver for Travel/Activities Outside Faculty Led International Program**

I, (Your Name): \_\_\_\_\_ request to voluntarily travel outside of the program dates for the \_\_\_\_\_ program. I understand and accept the risks of arriving early, remaining after the program ends, and/or traveling to/from a destination not on the program itinerary. I acknowledge that:

- The requested travel deviation may expose me to significant risks, including but not limited to terrorism, war, disease, serious bodily injury or death, property damage, and other risks.
- I freely accept all the risks associated with deviating from the established program.
- I acknowledge and understand that the University's travel accident and sickness program as well as the evacuation and repatriation program does not cover me outside of the program and that it is my responsibility to ensure that I have adequate medical, personal health and accident insurance coverage, as well as any available protection for my personal possessions.
- I understand that conditions in my travel location(s) may change rapidly and I will stay informed of current events by obtaining updated security and health information from and enrolling in, the U.S. State Department's Smart Traveler Enrollment Program (STEP) at <https://steps.state.gov/steps>, I understand that non-U.S. citizens are also strongly encouraged, if possible, to register with one's home country Embassy or Consulate and get updated information from the U.S. and home country Embassies or Consulates, as well as the U.S. Department of State ("DoS"), U.S. Centers for Disease Control and Prevention (CDC), and the World Health Organization (WHO) websites.
- I hereby acknowledge that I have discussed my travel with at least one of my parents, guardians, or next of kin who has also read and signed if required this form as indicated below.
- I understand that Northeastern University has no responsibility for services including housing, food, transportation, or any other necessities during the period outside of the established group travel dates for the program in which I am participating. Any additional expenses I incur due to my decision to travel outside of the program dates from the group travel dates or itinerary are fully my own responsibility and I will plan ahead to have sufficient funds for my expenses.

I realize there may be a fee associated with changing travel plans, for which I am responsible, in order to deviate from the established program.

**WAIVER AND RELEASE OF CLAIMS.** I hereby release, waive, discharge and covenant not to sue Northeastern University, its trustees, officers, agents, faculty and/or employees (hereinafter referred to as "releasees") from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or relating to any loss, damage or injury, including death, that may be sustained by me, or to any property belonging to me, in connection with travel and/or study at the travel location (s) described above. I voluntarily assume full responsibility for any loss, property damage or personal injury, including death that may be sustained by me, or any loss or damage to property owned by me or others, as a result of my traveling outside of the designated program dates. I further hereby agree to defend, indemnify and hold harmless the releases and each of them, from any loss, liability, damage or costs they may incur as a result of my travels. It is my express intent that this release shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representatives, if I am deceased, and shall be deemed as a release, waiver, discharge and covenant not to sue the above named releases

Please select the itinerary change that applies to you and complete the form accordingly.

Requesting to arrive on a date different from the program start date:

Program Start Date:   
Arrival Date:

Requesting to depart program on a date different from the program end date:

Program End Date:   
Departure Date:

Requesting to deviate during the program:

Departure Date:

Return Date:

Does your program have a required group flight?  Yes  No

Traveling to/from:

Accommodation(s):

Mode of travel:

Student Signature & Date: \_\_\_\_\_

NU ID: \_\_\_\_\_

Parent Signature & Date *(required if under 18 years of age)*  
\_\_\_\_\_

TO BE FILLED BY FACULTY LEADER

Request Approved  
 Request Denied

*Decision Rationale:*

Name of Faculty Leader: \_\_\_\_\_

Faculty Leader Signature & Date: \_\_\_\_\_

Plan for alternative travel arrangements for late arrivals, early departures and deviations during the program, including:

1. Pick-up/drop-off transportation to airport
2. Details on faculty or faculty assistant who will supervise transportation
3. Plan in case of flight cancelation or emergency

PLEASE NOTE: Completing the Reason for Request section of this form does not guarantee that the University will be able to accommodate your deviation from the scheduled program dates. Due to circumstances such as the nature of the program, curriculum, location and/or other factors affecting the program, the University may not be able to authorize a late arrival or early departure from the program.

REGISTER YOUR SIDE TRIP ITINERARY IN MY TRAVEL PLANS AT [HTTPS://MY.NORTHEASTERN.EDU](https://my.northeastern.edu)