## Waiver, Release and Hold Harmless Agreement For Purdue University Students Intending to Study in Country Under Travel Warning

				arding travel to	
"Country of Trave aware that the Stat of such changes.	<u>l'')</u> by United States citize e Department may issue	ens datedadditional or more sev	ere warnings and I acc	ravel Alert regarding Cour cept responsibility for keep	ntry of Travel. I am ing myself informed
In spite of such inf	formation and warnings, l	I have voluntarily deci	ded to travel to Count	ry of Travel.	
				t judgment and to follow the can guarantee my safety	
	ould I decide to come hor refund of tuition or any o			security concerns, I will n	ot be entitled to
				r under a legal disability) r under or through me, as fo	
of which I may not voluntarily incur a travel to stated Co	t fully appreciate) and that Il risks of any injuries, da untry of Travel, regardles sustees of Purdue Univers	at injuries, death, prop amages, or harm which as of whether or not ca	erty damage or other h n arise during or result used in whole or in pa	Country of Travel involves narm could occur to me or of from my participation in the try the negligence or other, employees, trustees, office of the country of the negligence or other.	others. I accept and his program and er fault of Purdue
and unknown, whi whether or not cau	ch arise during or result f	from my participation	in this program and sta	damages, losses or claims ated travel to Country of T leased Parties. I release an	ravel, regardless of
(including but not as a result of any c recover any losses,	limited to reasonable atto- laims or suits that I (or a liabilities, costs, damage	orneys' fees and other languages, or expenses which	litigation costs and exp der or through me) ma arise during or result f	osses, liabilities, damages, penses) incurred by any of my bring against any of the from my participation in the the negligence or other fa	the Released Parties Released Parties to is program and
4. I execute it voluntar	•	reviewed this Waiver,	Release and Hold Har	rmless Agreement. I under	rstand it fully and I
5. 1	understand I am require	d to procure Purdue's	international travel me	edical/evacuation insurance	e coverage.
I	EXECUTED this	day of	, 20	·	
Student Signature		Student's P	rinted Name		
Parent or Guardian (If student is under legal disability)	n Signature r the age of eighteen or u		rdian Printed Name		

--- Return to Purdue University International Programs- Young Room 120---

Revised 9/22/2010