

Greater Lafayette Sister City Student Exchange Program Waiver

I,, agree to participate in Greater Lafayet	te Sister Cit
Student Exchange Program (the "Program"). The program dates for the exchange	are July 9-
17, 2024. I hereby agree to comply fully with the terms and requirements of this was	iver and
release as a condition for my admission into and continued presence in this prograi	n.

- 1. I understand, acknowledge, and agree that, as a visitor to a foreign country, I am subject to the laws of that country. I agree to comply with those laws. I understand, acknowledge, and agree that being charged with any infraction of the laws of the host country may subject me to immediate removal from the Program, and that I will not receive a refund of travel expenses. In addition, I understand, acknowledge, and agree that, should I have any legal problems in the host country, I alone am solely and exclusively responsible for all legal costs incurred as a result. I understand, acknowledge, and agree that Greater Lafayette Commerce and any other participating entities cannot and will not provide legal counsel in such circumstances.
- 2. I understand, acknowledge, and agree that, at all times during my travel with the Program, I must possess a valid United States passport. If I am not a United States citizen, I understand, acknowledge, and agree that I must possess a valid non-U.S. passport or official travel document and any visas (*e.g.*, tourist or student visa) or other immigration documents (*e.g.*, U.S. "green card", Form I-20) required for entry into a non-U.S. country and re-entry into the United States. In the event that I am prevented from participating in the Program at any time due to my failure to possess all necessary documents, I understand, acknowledge, and agree that I alone shall bear sole and exclusive responsibility for all costs incurred on account of delayed departure from any location, or return home. I have attached a photocopy of each and every necessary travel document referenced above that is required for my participation in this trip.
- 3. I understand, acknowledge, and agree that activities or independent travel conducted when I have free time before, during, or after the Program shall be unsupervised by Greater Lafayette Commerce, its agents or employees. I hereby understand, acknowledge, and agree that neither Greater Lafayette Commerce, nor its trustees, officers, employees, or agents shall have any responsibility or liability for any injury, damage or loss that I sustain during such periods of independent activity or travel, and this Release shall remain in full force and effect during such

times. I further agree to indemnify and hold harmless Greater Lafayette Commerce and its trustees, officers, employees, and agents from and against any threatened or actual claim, cost, expense or liability (including, without limitation, costs and attorneys' fees incurred in enforcing this indemnity) attributable to bodily injury, sickness, disease, or death, or to damage to or destruction of property (including loss of use thereof), caused by, arising out of, resulting from, or occurring in connection with my act(s) or omission(s) during such times.

- 4. I understand, acknowledge, and agree that, if I voluntarily leave the Program for any reason, including illness, I alone am solely and exclusively responsible for any and all costs associated with my return home. I further understand, acknowledge, and agree that any refund of tuition and fees shall be issued only if appropriate pursuant to the Program's rules, regulations, policies, and procedures.
- 5. I hereby authorize Greater Lafayette Commerce, and its employees, agents, and authorized representatives in case of an emergency to act in any attempt to safeguard and preserve my health and/or safety during my participation in the Program, including authorizing medical treatment on my behalf and at my expense, and returning me to the United States at my own expense for medical treatment in case of an emergency.
- 6. I, voluntarily and without reservation, and realizing the full legal significance of my action, hereby waive, renounce and release, on behalf of myself and my family, all claims of whatever nature against Greater Lafayette Commerce including, but not limited to, claims of any injury, loss, damage, accident, delay, irregularity or expense caused by strikes, war, weather, sickness, quarantine, government restrictions, or arising from any act or omission of any steamship, airline, railroad, bus company, hotel, restaurant, school or university, firm, agency or individual, or for any other cause whatsoever arising out of, resulting from or in connection with the above-referred travel Program. Further, I accept personal responsibility for any injury (including, but not limited to, personal injury, disability, dismemberment and death), illness, damage, loss, claim, liability or expense, of any kind or nature that I or my property may suffer, and agree to release Greater Lafayette Commerce and any other participating entities from any liability arising from any such risks.

my ability to travel and/or participate in not been advised otherwise by a medica	any of the activities involved in this Program, and have l practitioner.
8. I hereby acknowledge that I have understand its terms and provisions.	e read this document in its entirety and that I fully
Participant's Name (Please Print)	Date:
Participant Signature	
Guardian's Name (Please Print)	Date:
Guardian Signature	

I hereby acknowledge that I am in good health, have no physical conditions that affect

7.