**International Travel Advisory, Assumption of Risk and Waiver**

**Please print, complete, and sign the following waiver form.**

I have voluntarily and freely elected to travel to the country of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ during (dates) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in order to participate in research, course work, or other academic pursuits.

I am aware that the United States Department of State has issued a Travel Warning for the country of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and that the Department of State recommends that Americans avoid travel to this country. I confirm that I have read and understand this Travel Warning and that despite this, I have made the decision to proceed.

I recognize that there are risks associated with all international travel. I further understand and acknowledge that travel to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at this time exposes me to risks of a greater likelihood and magnitude than those normally associated with international travel. These risks include those described within the State Department Travel Warning, as well as risks associated with ground, air, or water transportation, adverse weather conditions, communicable disease, medical care, substandard building construction or maintenance, civil unrest, terrorism, war, and negligent or criminal acts of third parties. I understand that should any of these adverse circumstances occur, the result could include bodily injury, death, or property damage. I recognize that The University of Toledo cannot guarantee my safety.

I understand and acknowledge that this study abroad travel is wholly voluntary and that I am not required to travel to this location in order to satisfy any academic requirements of the University of Toledo. I hereby voluntarily assume full responsibility for any loss, property damage or personal injury, including death, which may be sustained by me as a result of this study abroad. I hereby agree to release, indemnify and hold harmless the University of Toledo, its officers, employees, agents and representatives, from any and all claims, demands or causes of action, and all expenses incidental thereto (including attorney's fees), based upon or arising out of any loss, property damage, or personal injury, including death, caused by or resulting in any way from study abroad.

With the intent to be legally bound, I acknowledge and represent that I have read this Memorandum of Understanding/Waiver and Release, that I understand same, and that I voluntarily sign below in order to demonstrate my agreement with the terms set forth herein, with full knowledge of the possible risks associated with study abroad.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant's Name (please print or type)                  Rocket ID Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Participant                                    Date

The liability waiver should be submitted to the International Global Education Committee, either by scan to eduabroad@utoeldo.edu, or mailed to 2801 W. Bancroft St, MS131, Toledo, OH 43606