

Agreement for Participation in the UGA Kenya Study Abroad Program

I, (print name) _____ an applicant for the UGA **Kenya Study Abroad Program** (hereinafter "Program"), hereby agree as follows:

1. I have read and understand the program itinerary and Consular Information Sheet.
2. I will comply with The University of Georgia's student conduct regulations throughout the duration of my participation in the Program, as well as the standards of conduct of the host institutions, national parks, and local cultures. I agree that the Program Directors shall have the right to enforce appropriate standards of behavior and that I may be dismissed from the Program at any time for failure to comply with such standards.
3. I understand that engaging in political activity in Kenya, including but not limited to joining political parties or unions, participating in demonstrations, soliciting political material or picketing may be dangerous or illegal. If I have legal problems because of such activities, I understand that Board of Regents of the University System of Georgia (hereafter "University") cannot provide legal counsel.
4. I understand that as an American citizen in a foreign country, I will be subject to the laws of that country. I agree to comply with those laws, as well as with the regulations of the host university, including refraining from using, possessing or selling any illegal drugs. I understand that being charged with any infraction of the laws of the host country, including possession of any illegal drugs is grounds for immediate expulsion from the program, without refund. In addition, I understand that should I have any legal problems in Kenya, that I will be responsible for any legal costs incurred as a result. The University cannot provide legal counsel in such circumstances.
5. The University strongly discourages owning or operating motor vehicles while participating in study abroad, due to the inherent dangers of driving in a country with different traffic laws, driving habits, and regulations relating to insurance. If, however, I decide to operate a motor vehicle while abroad, I recognize that the University assumes no financial responsibility for any legal assistance, car repairs or medical care if I am involved in an accident while operating a motor vehicle in the host country.
6. I understand and acknowledge that there are inherent health risks associated with traveling abroad. I agree that I am personally responsible for obtaining all health information, instruction, medical procedures, immunizations and medications appropriate to my intended travel. I recognize that the University is not responsible for any of my medical or medication needs and I assume all risk and responsibility therefore. I further agree that if I become incapacitated, the University, through its agents and employees, may take whatever action is deemed necessary with respect to my health and safety. I authorize the University, its agents and employees to place me, at their discretion and without my further consent, in a hospital or in the care of a local doctor for medical services and treatment. If necessary or desirable, I also authorize them to transport me back to the United States by commercial airline or otherwise for medical treatment. I agree that I, along with my parents or guardian, will be fully responsible for any and all expenses, including transportation costs, associated with or in any way related to my medical care.
7. I understand that if I choose to travel independently during my free time in the Program, such travel will be unsupervised by the University, its agents or employees. I agree that the University, its agents and employees shall have no responsibility or liability for any injury, damage or loss suffered by me during such periods of independent travel.
8. I understand that this is an academic program, and will follow the rules set for class attendance and participation by each professor, including doing all assigned work and taking all examinations. I

realize that noncompliance with these rules may result in a failing grade which will be reflected on my University of Georgia transcript. I am aware that I will receive no academic credit for a failing grade.

9. I agree that in the event that I become detached from the group due to failure to meet the group at an assigned time, I will bear all responsibility to seek out, contact, and reach the group at its next available destination, and I understand that I will bear all the costs involved in contacting and reaching the group.

10. I understand that the University reserves the right to make cancellations, changes or substitutions in the Program at any time because of emergency, changed conditions or the Program Director's determination that such changes or substitutions are in the best interest of the Program or its participants.

11. I understand that if my participation in the Program is terminated by the Program Directors, I will be sent home with no refund of fees. If I am sent home before completion of the Program, I agree that I, along with my parents or guardian, will be responsible for any and all costs and expenses associated with my return home. I also understand that if I leave the Program voluntarily for any reason, including illness, I will be responsible for any and all costs and expenses associated with my return home and that there will be no refund of any fees.

I certify that I have read and understood the above.

Signature of Student _____
Date

Signature of Parent or Guardian (for students under 18) _____
Date

Person to be Notified in Case of an Emergency

Name _____ Relationship: _____

Phone: Home _____ Work _____

Address _____

E-mail _____

Release, Waiver of Liability and Covenant Not to Sue to Be Signed by Participant

I hereby acknowledge my awareness that my participation in the UGA Study Abroad Program in _____ may expose me to risk of property damage and bodily or personal injury, including injury that may prove fatal. I understand that the risks that I may encounter include but are not limited to airplane crashes, motor vehicle accidents, political unrest, terrorist incidents, sickness and criminal acts, as well as other risks that may not be foreseeable. **(Tailor to your program and planned activities and risks and name each specific risk in the above section – e.g. malaria, tram accidents, etc.)** I hereby assume any and all such risks.

For the sole consideration of the University's arranging for my participation in the UGA Study Abroad Program in _____, I hereby release and forever discharge The University of Georgia, the Board of Regents of the University System of Georgia, their members individually and their officers, agents and employees from any and all claims, demands, rights and causes of action of whatever kind, arising from or by reason of any personal injury, property damage, or the consequences thereof, resulting from or in any way connected with my participation in the Program.

I further covenant and agree that for the consideration stated above I will not sue the Institution, the Board of Regents of the University System of Georgia, its members individually, its officers, agents, or employees for any claim for damages arising or growing out of my voluntary participation in this program.

I understand that the acceptance of this Release, Waiver of Liability and Covenant Not to Sue by the Board of Regents of the University System of Georgia shall not constitute a waiver, in whole or in part, of sovereign immunity by said Board, its members, officers, agents, and employees.

I certify that I have read and understood the above.

Signature of Student

Date

Signature of Parent or Guardian (for students under 18) Date