

Agreement for Participation in 2015 Georgia Law Summer Program in EU Business Law & WTO Trade Practice

I, (print name) _____ an applicant for the Georgia Law Summer Program in EU Business Law & WTO Trade Practice (hereinafter "Program"), hereby agree as follows:

1. I have read and understand the attached 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 institution. I agree that the Program Director 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 the host country, 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 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 the host country, 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 recommends against owning or operating motor vehicles (including motorcycles, mopeds, and all other motorized vehicles, as well as cars) 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 or its agents or employees assume no responsibility for my safety and for costs or difficulties that I may incur, and that I participate in these activities at my own risk.
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 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 the Office of International Education at the University of Georgia strongly recommends that I visit the UGA Travel Clinic to receive additional, country-specific health and travel information.

8. I understand that if I engage in recreational activities, sports, tours, travel, or any other activities during free time and outside of organized University study abroad program activities that the University or its agents or employees assume no responsibility for my safety or any liability for costs or difficulties that I may incur, and that I participate in these activities at my own risk.

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. I understand that the University is not responsible for the cost of replacing airline tickets if the carrier goes into bankruptcy.

11. I understand that if my participation in the Program is terminated by the Program Director, I will be dismissed with no refund of fees. If I am dismissed before completion of the Program, I agree that I will be responsible for any and all costs and expenses associated with my return home, and that I will also be responsible for my own travel arrangements 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.

12. I understand that if this program contains an alcohol-related cultural event (ex., wine tasting, etc.), that this event is not compulsory, and that I will be solely responsible for any injuries or property damage arising in relation to my participation in the event.

13. I agree that, should any provision or aspect of this agreement be found to be unenforceable, all remaining provisions of this agreement will remain in full force and effect.

14. I certify that my agreement to the provisions herein is wholly voluntary.

15. I certify that I am at least 18 years of age or, if not, that I have secured below the signature of my parent or legal guardian as well as my own. 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 Georgia Law Summer Program in EU Business Law & WTO Trade Practice 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 transportation accidents, malaria, tuberculosis, dengue fever, Japanese encephalitis, Lyme disease, hepatitis A, hepatitis A, rabies, typhoid fever, schistosomiasis, avian influenza H5N1, *E. coli*, *Salmonella*, cholera, crime, and international or domestic terrorist incidents. I understand that if I engage in recreational activities, sports, tours, travel, or any other activities during free time and outside of organized University of Georgia study abroad program activities that the University of Georgia assumes no responsibility for my safety and for costs or difficulties that I may incur, and that I participate in these activities at my own risk.

I understand that there are other risks that may not be foreseeable. Furthermore, I acknowledge that I have read the Consular Information Sheet for the country or countries visited on this study abroad program issued by the United States Department of State. I understand that I may obtain the most current Consular Information Sheet at the following website:

<http://www.travel.state.gov/>

I hereby assume any and all such risks.

For the sole consideration of the University's arranging for my participation in the Georgia Law Summer Program in EU Business Law & WTO Trade Practice, 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, and I voluntarily agree to all of the provisions herein.

I certify that I am at least 18 years of age or, if not, that I have secured below the signature of my parent or legal guardian as well as my own.

Signature of Student

Date

Printed Name of Student

Signature of Parent or Guardian (for students under 18)

Date

