STUDENT NAME: ___________________________________________________________
BOSTON COLLEGE I.D. NUMBER: ____________________________________________
NAME AND LOCATION OF TRIP: _____________________________________________
SPONSORING UNIVERSITY DEPARTMENT: ___________________________________
DATES OF TRAVEL: ________________________________________________________

1. Fees and Payments: Upon acceptance into the program I will agree to pay any deposit required by
   the sponsoring department unless other arrangements are made with the trip leader. Additionally, I
   commit myself to fundraising activities necessary to cover the remainder of the expenses incurred by
   the program. I understand that the program does not cover expenses for passports, visas, medical
   services, or recommended immunizations. I understand that if I willingly withdraw from the program,
   or am removed for disciplinary reasons, no refunds will be given to me or to those who donated in my
   name.

2. Immunizations: I certify that I have been provided with information regarding the professionally
   recommended immunizations and vaccinations for travel to the destination listed above. I have
   considered these recommendations in my own decision to obtain or not obtain the recommended
   immunizations and vaccinations.

3. Medical History Profile: As a protection in case of medical emergency occurring during my
   participation, I have provided the sponsoring department with the medical profile form which contains
   complete and accurate information about my known current state of health as well as information
   about my insurance coverage. I certify that my health insurance is valid overseas for hospitalizations
   and physician care.

4. Conduct: I understand and agree to observe the laws of the country in which I will be residing, as
   well as any other rules imposed by the trip leader and any host institution. If I do not abide by such
   regulations and rules based on the interpretation of the trip leader or host organization, I agree to abide
   by the appropriate disciplinary actions up to and including my premature termination of the program
   and will return as soon as possible to the U.S. at my sole cost and expense.

I further understand and accept that while participating in the travel abroad program I will remain
enrolled as a degree candidate at the University and, as such, I agree to adhere to the University's Code
of Conduct as set forth in the Boston College Student Life Guide.

5. Informed Consent: I am aware that there are inherent risks in travel and work in international
   settings. I understand that the political and environmental and cultural situations in the country listed
   above differ from those in the U.S. and the University environment. I understand that this reality
   requires me to act with appropriate caution and within the guidelines set forth by the University, trip
   leader, and representatives of our host organization. I understand that situations in foreign nations can
   be unpredictable and may become volatile and dangerous, often within a very short period of time. I
   understand that in such circumstances evacuation may prove difficult or impossible.
I further understand that foreign visitors should avoid situations that have the potential for becoming politically volatile or otherwise dangerous. I understand there are health risks. There are risks of travel as well, including risks associated with air travel, motor vehicles, and poor driving conditions.

I believe that I have been fully and adequately briefed regarding the risks inherent in the overseas experience. I have received and read the relevant U.S. Department of State Public Announcements, Travel Warnings and Consular Information Sheets.

I have weighed the dangers inherent in foreign travel and work, the risks presented to my own health and well being, and my personal desire to further my educational experiences by traveling and working in foreign countries. I have had the opportunity to ask questions which have been answered to my satisfaction. I have shared these materials with a parent or legal guardian and discussed the information received with them. Nonetheless, I acknowledge that there may be additional factors which may not have been brought to my attention. I have concluded that the risks are acceptable and are outweighed by my desire to participate. I acknowledge that my participation is voluntary and is not required as part of my education at the University.

With this knowledge and information, I agree to participate in the program, and the air travel, at my own risk. I, for myself and my personal representatives, heirs, and assigns, do hereby release and hold harmless Boston College and each and every officer, employee, and agent of the University, from any and all claims and causes of action that I may have against them by reason of any accident, illness, injury, death or other consequence resulting directly from or in any manner arising out of, or in connection with, my participation in this service/immersion program, even though the claim or liability may arise out of the negligence or carelessness on the part of the University, or any third person, whether foreseen or unforeseen, known or unknown.

In consideration for the University allowing me to participate, I voluntarily assume all risks arising out of my participation in the Boston College service/immersion program listed above.

THIS IS A LEGALLY BINDING DOCUMENT.

___________________________________  _______________________________
Signature        Date

____________________________________
Printed Name

____________________________________
Co-signature of parent or guardian if student is under 18 years of age

(August 2004)