



St. Mary's College of Maryland  
at Historic St. Mary's City

**Study Abroad Off-Campus Programs Participation Form**

In consideration of my (self, son, daughter) being permitted to participate as a student in a St. Mary's College of Maryland off-campus study program, I hereby agree that there are elements of risk in foreign study including but not limited to those that I have been advised about. I am aware of potential dangers in studying abroad and I also understand that this includes, but is not limited to, the possibility of political or civil unrest, crime, and other safety issues. I also understand that all countries have different laws, regulations or standards or may have little or no laws, regulations or standards or do not enforce those laws, regulations or standards it may have including, but not limited to, those relating to health, welfare, safety, crime, regulations of businesses and transportation in any form (including airlines, airports, or travel by sea, land or air). I have read over the material provided on safety and health and I acknowledge that I have been advised to share this material with my family. I also acknowledge it is solely my responsibility to acquaint myself with the potential dangers of all aspects of risks associated with studying abroad.

**INDEMNIFICATION**

I agree to indemnify and hold harmless St. Mary's College of Maryland and its representative(s) and agent(s) from any and all claims and causes of action for damage to or loss of property, personal illness or injury, or death arising out of travel or activity conducted by or under the control of St. Mary's College of Maryland with regard to the off-campus program, including the rendition of medical treatment. I am aware of provisions for transportation and accommodations. I acknowledge that there may be unavoidable or unforeseen changes that may occur in this trip, in which case the College will make the best effort to secure an appropriate alternative. I am aware that these attempts may create greater risk than originally planned.

**WITHDRAWAL FROM PROGRAM**

I further understand that I am solely responsible for any and all costs arising out of my (own, son or daughter's) voluntary or involuntary withdrawal from the program prior to its completion, including but not limited to withdrawal caused by illness or disciplinary action by St. Mary's College of Maryland, my host institution, or the program director. In the event that St. Mary's College of Maryland or its agents has committed expenses on my behalf prior to the start of the program, I understand that these funds may not be refundable.

## RULES OF CONDUCT

I understand that as a participant in this off-campus program, I am subject to all the laws and regulations of the country, state, or province where I am studying, or where any of the tours are conducted. I realize there are possible significant cultural and legal differences between the United States and that country. I also understand that it is my responsibility to be informed about the laws of that country, state, or province and to conduct myself in a manner that complies with those laws. I will comply with all procedures of the program and obey host-country laws and I will adhere to St. Mary's College of Maryland policies and procedures. I will behave in a manner that is respectful of the rights and well-being of others, and encourage others to behave in a similar manner. I accept responsibility for my own decisions and actions. I will follow the program policies for keeping program staff informed of my whereabouts. I understand and agree to follow the rules of the program leader(s) during the entire period of the program, including free time. The use of illegal drugs or alcohol (if I am underage) during the entire period of the program, including free time, is strictly prohibited. I agree to follow the host country's alcohol law(s), regulation(s) and policy(s) as well as St. Mary's College of Maryland's alcohol policy. I understand that sometimes during free time within the program and after the program has ended, I may elect to travel independently at my own expense. I understand that neither St. Mary's College of Maryland nor its staff are responsible for me while I am traveling independently during such free time. Neither St. Mary's College of Maryland nor any of its agents or employees shall, under any circumstances, be responsible for any illegal activities that I may engage in. I further agree to abide by all policies of the program. I understand that any inappropriate or violent behavior will result in my dismissal from the program. I understand and agree that I am responsible for cooperating with the leader and the group, paying attention to announcements, and being respectful of the culture of the country I will be in. I further agree I am responsible for behaving as a group member, being cooperative, and considering group needs. I understand that the appropriate staff representative of St. Mary's College has the right to withdraw me from the tour and send me home when he/she determines that this is in the best interests of the health, safety, and general or academic welfare of the tour group or of the individual participant. I understand that if I am asked to withdraw from program, I agree I will do so. I further realize this may mean a loss of all academic credit and costs relating to the program. I also understand if there are any other additional costs to send me home early because of my behavior or because of any other reason, I am responsible for all such costs. I also understand this is an academic program. I understand and agree I am responsible for attendance at classes and scheduled trips. Furthermore, I understand that St. Mary's College of Maryland has the authority to discontinue my participation in the program, if in the judgment of St. Mary's College of Maryland, my conduct is unacceptable.

MEDICAL EMERGENCY

I understand that on rare occasions an emergency may develop while I am off campus on a St. Mary's College of Maryland program which necessitates the administration of medical care, hospitalization, or surgery. Therefore, in the event of injury or illness to my (self, son, daughter) and if I am unable to grant permission at the time emergency treatment is required, I hereby authorize St. Mary's College of Maryland by and through its authorized representative(s) or agent(s) in charge of the program, to secure any necessary treatment including, but not limited to, the administration of an anesthetic and surgery. I understand that such treatment shall be solely at my expense and I agree to reimburse St. Mary's College of Maryland for any expenses which it might suffer on account of my injury or treatment. I understand that I have authorized, not required, St. Mary's College of Maryland to secure medical treatment on my behalf or on behalf of the program participant.

**IN WITNESS WHEREOF**, I have caused this Participation Form in its entirety to be executed this \_\_\_\_\_ day of \_\_\_\_\_, 2002.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

If under 18, a Parent or Legal Guardian signature is also needed:

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Co-signature of Parent or Guardian  
If student is under 18 years of age

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name