



## OFFICE OF UNDERGRADUATE INTERNATIONAL PROGRAMS STUDENT AGREEMENT AND RELEASE

In consideration of being allowed to participate in the \_\_\_\_\_  
Program (hereinafter the "Program"), I, \_\_\_\_\_, (or my parent of  
guardian if I am under age of 18) hereby agree to the following conditions of participation.

1. I understand that my participation in the program is contingent upon my being in good academic standing at Endicott College at the time of my departure. I agree to participate fully and completely in a series of pre-departure orientation meetings. I understand that if I fail to participate fully in the pre-departure orientation, I will not be permitted to participate in the program.
2. I understand that as an Endicott College student in a foreign country, I will be subject to the laws of that country. I also understand that I will be viewed as a representative of my country and of Endicott College, and I agree to conduct myself in a manner that will represent Endicott in a positive manner abroad. I understand that the Resident Director(s) of the program has/have the authority to establish rules and guidelines necessary for the operation of the Program, and to discontinue my participation in the Program if, in the judgment of the Resident Director (s), my conduct is unacceptable. Behavior that can result in my immediate dismissal from the Program includes, but is not limited to, the use of or possession of illegal drugs, behavior disruptive to the Program or offensive to the host culture, and/or violations of local, state, or national laws, or regulations of Endicott College. I understand that a decision to dismiss me from the Program will be final and no refund will be made.
3. I am aware that all Program deposits and payments are non-refundable.
4. In the case of a medical emergency occurring while I am a participant in the Program, and under circumstances which prevent me from giving personal consent, I hereby authorize Endicott College by and through its authorized representative(s) or agent(s) in charge of the Program, to secure whatever medical treatment is deemed necessary, including the administration of an anesthetic or surgery. It is understood that such treatment shall be solely at my expense and I agree to reimburse Endicott College for any expenses it might suffer on account of said treatment.
5. I understand that if my host institution / program provider does not supply supplemental international health insurance, I will be covered under the Endicott College HTH Insurance policy. I hereby confirm that I am also covered under my own personal medical insurance policy and *have verified that my coverage is valid in the country of the program.*
6. In consideration of being permitted to participate in the Program, I, the undersigned student (or parent or guardian if the student is under 18 years of age), in full recognition and appreciation of the risks, dangers, hazards, and responsibilities inherent in the

Program, and during transportation to and from the program, do hereby agree to assume all risks, dangers, hazards, and responsibilities surrounding or in any way involving my participation in the Program or any independent research or field activities undertaken as adjunct thereto; and, further, I do for myself, my heirs, assigns and personal representative(s) hereby agree to defend, hold harmless, indemnify, release, and forever discharge Endicott College and all its officers, agents, and employees from and against any and all claims, demands, actions, or causes of action, on account of damage to personal property, or personal injury, or death which may result from or in any way involve my participation in the Program.

**In witness whereof, I have caused this release to be executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.**

**Signature** \_\_\_\_\_

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

**Co-signature of Parent or Guardian** \_\_\_\_\_

(Required for participants under the age of 18; recommended for all participants)