STATEMENT OF RESPONSIBILITY AND AUTHORIZATION:
WAIVER, RELEASE, AND INDEMNIFICATION AGREEMENT

I, __________________________, am a student at Illinois Wesleyan University. I have agreed to participate in __________________________(the “Program”) in _________________________(Country) during the period_________________________ through ________________________. My participation in the Program is wholly voluntary. In consideration of the University’s agreement to permit me to participate in the Program, I hereby certify that I have read and understand the following statement of University policies relating to travel courses offered by the University, and I agree as follows:

1) I hereby represent and warrant that I am and will be covered throughout the Program by a policy of comprehensive health and accident insurance which provides coverage for injuries and illnesses I sustain or experience while traveling inside the United States or overseas, and, more specifically, in the countries in which I will be living and/or traveling while on the Program. By my signature below, I certify that my health insurance policy will adequately cover me while inside or outside the United States. I absolve the University of all responsibility and liability for any injuries, illnesses (including death), claims, damages, charges, bills and/or expenses I may incur during the program. I agree to report to the University’s Dean of Students any physical or mental condition I have which may require special medical attention or accommodation during the Program at least ninety (90) days prior to departure. I agree that the Program Director may be apprised of the condition.

2) I understand that although the University will attempt to maintain the Program as described in its publications and brochures, the University reserves the right to make changes to the Program itinerary at any time and for any reason, with or without notice, and that the University shall not be liable for any loss whatsoever to participants by reason of any such cancellation or change. The University is not responsible for penalties assessed by air carriers that may result due to operational and/or itinerary changes, regardless of whether the participant or the University made flight arrangements. Any additional expense resulting from the above will be paid by the participant. The University reserves the right to substitute hotels or accommodations or housing of similar category at any time. Specific room and housing assignments are within the sole discretion of the University. The right is reserved by the University, in its sole discretion, to cancel the Program or any aspect thereof prior to departure; and, in the University’s sole discretion, to cancel the Program or any aspect thereof after departure, requiring that all participants return to the United States, if the University determines or believes that any person is or will be in danger if the Program or any aspect thereof is continued.

3) I understand and acknowledge that the University assumes no responsibility or liability, in whole or in part, for any delays, delayed or changed departure or arrival times, fare changes, dishonors of hotel, airline or vehicle rental reservations, missed carrier connections, sickness, disease, injuries (including death), losses, damages, weather, strikes, acts of God, circumstances beyond the control of the University, force majeure, war quarantine, civil unrest, public health risks, criminal activity, terrorism, expense, accident, injuries or damage to property, bankruptcies of airlines or other service providers, inconveniences, cessation of operations, mechanical defects, failure or negligence of any nature howsoever caused in connection with any accommodations, restaurant, transportation, or other service or for any substitution of hotels or of common carrier beyond the University’s control, with or without notice, or for any additional expenses occasioned by any of the foregoing. If due to weather, flight schedules or other uncontrollable factors I am required to spend additional nights, the University will not be responsible for my hotel, transfers, meal costs or other expenses. My baggage and personal property is at my risk entirely.

4) The University reserves the right to decline to accept or retain me in the Program at any time should my actions or general behavior impede the operation of the Program or the rights or welfare of any person. Similarly, if my conduct violates any policy or procedure of the University, I understand that I may be required to leave the Program in the sole discretion of the University’s agents and representatives, and may be referred to the appropriate University officials for further disciplinary or other action. I understand that I will be escorted to the departure gate by a University representative. In such an event, no refund will
be made for any unused portion of the Program, and all my return expenses and all expenses incurred by
the faculty member(s), class, or individual will be my responsibility.

5) I am aware that any potentially unsafe behavior is to be avoided (examples, but not limited to:
alcohol abuse, illegal drug usage, walking alone in a city at night, being in unsafe neighborhoods,
swimming in ocean currents). The University’s health insurance program does not cover potentially unsafe
activities, such as skydiving, recreational parachuting, hang gliding, glider flying, parasailing, sail planing,
and bungee jumping. I am also aware that it is specifically forbidden to rent motor vehicles, including
vehicles for water sports.

6) I understand that, although the University has made every reasonable effort to assure my
safety while participating in the Program there are unavoidable risks in travel. I, individually, and on behalf
of my heirs, successors, assigns, and personal representatives hereby release, acquit and forever discharge
the University and its employees, agents, officers, trustees and representatives (in their official and
individual capacities) from any and all liability whatsoever for any and all damages, losses or injuries
(including death) I sustain to my person or property, or both, including but not limited to any claims,
demands, actions, causes of action, judgments, damages, expenses and costs, including attorneys’ fees,
which arise out of, result from, occur during or are connected in any manner with my participation in the
Program and/or any travel incidental thereto.

7) I, individually, and on behalf of my heirs, successors, assigns and personal representatives,
hereby agree to indemnify, defend and hold harmless the University and its employees, agents, officers,
trustees and representatives (in their official and individual capacities) from any and all liability, losses,
damages, judgments or expenses, including attorneys’ fees, that they or any of them incur or sustain as a
result of any claims, demands, actions or causes of action that arise out of, occur during, or are in any way
connected with my participation in the Program and/or any travel incidental thereto.

8) I represent that my agreement to the provisions herein is wholly voluntary, and further
understand that, prior to signing this agreement, I have the right to consult with the advisor, counselor, or
attorney of my choice.

9) I agree that this Statement of Responsibility and Authorization: Waiver, Release and
Indemnification Agreement, is to be construed under the laws of the State of Illinois, U.S.A.; and that if any
portion hereof is held invalid, the balance hereof shall, notwithstanding, continue in full legal force and
effect. In signing this document I hereby acknowledge that I have read this entire document, that I
understand its terms, that I will abide by each of the terms and conditions, that by signing it I am giving up
substantial legal rights I might otherwise have, and that I have signed it knowingly and voluntarily.

10) I represent that I am at least eighteen years of age, or if not, that I have secured below the
signature of my parent or guardian as well as my own.

(Signature of Student)  
Name (Printed)  
Dated

(Signature of Parent/Guardian
if Student is under the age of 18)

Approved, Dunn Law Firm, 1/14/03