



**Campus Ministry
Statement of Responsibility, Waiver and Release**

I, _____, a(n) _____ of John Carroll University
(Full Name) (Student, Faculty/staff member, Guest)

(JCU), would like to participate in the immersion program to _____ on the
(Location)

following dates: _____.

In exchange for John Carroll University's agreement to allow me to participate in this program, I agree as follows:

1. I understand that there are risks involved with travel. I understand the nature of the program and have been given the opportunity to ask questions about the program and travel to and from the program. I understand that JCU does not require me to participate, but I want to do so, despite any risks and despite this statement of responsibility, waiver and release ("statement").
2. I represent and warrant that I am and will be covered throughout the program by a policy of comprehensive health and accident insurance providing coverage for injuries and illnesses I sustain or experience abroad or during travel outside the United States. I absolve JCU from all responsibility and liability for any injuries, illnesses, claims, damages, charges, bills and/or expenses I may incur during the program, including travel to and from the program.
3. I understand that JCU reserves the right to decline to accept or retain me in the program at any time should my behavior impede program operations or the rights or welfare of any person. I understand that if I violate any JCU policy or procedure, I may be required to leave the program at the sole discretion of JCU representatives. In such an event, no refund will be made and I will bear any costs associated with the decision to require me to leave the program and return to the United States. If a JCU representative determines that proceeding with the program will subject participants to increased danger, I understand that JCU may, in its sole discretion, cancel the program before departure, or cancel the program after departure and will require that all participants return to the United States. I understand that in such an event, no refund will be made and I will bear my share of any costs associated with the decision to cancel the program and return to the United States.
4. In exchange for the opportunity to participate, I personally assume all risks in connection with my participation in and travel to and from the program. I release JCU, its trustees, officers, agents, employees and representatives (individually and in their official capacities) from any and all liability for any personal injury (including death) or damage to personal property (including total loss) in connection with my participation in and travel to and from the program. I agree to indemnify, defend and hold harmless JCU and/or any of those mentioned above from any and all liability, losses, damages, judgments or expenses, including attorney's fees that they or any of them incur or sustain in connection with my participation in and travel to and from the program. I understand that this statement covers any and all claims against JCU or any of those mentioned above. I also understand that this statement binds me, my family, estate, and/or heirs.
5. I agree that this statement is to be construed under the laws of the State of Ohio, and that if any portion is held to be invalid; the balance shall remain in full force and effect. I have read this statement in its entirety. I understand its terms and agree to be legally bound by it.

Participant Name (please print): _____

Participant Signature: _____ Date: _____