LAMAR UNIVERSITY

INTERNATIONAL TRAVEL RELEASE, HOLD HARMLESS, AND INDEMNITY AGREEMENT FOR TRAVEL ABROAD

(TO AREAS WITHOUT A TRAVEL WARNING* BY THE U.S. STATE DEPARTMENT)

*There is a separate waiver for travel to areas having a Travel Warning by the U.S. State Department – Do not use this waiver for those areas.

l,	have requested and voluntarily choose to participate in	
the Lamar University travel to	have requested and voluntarily choose to participate in ("Travel") during the dates of	
through In consideration for	Lamar University's ("the University") funding and/or	
facilitating the Travel, I (for myself, my heirs, executors and administrators) HEREBY RELEASE, HOLD HARMLESS,		
DISCHARGE, AND OTHERWISE AGREE TO INDEMNIFY the University, the Texas State University System, their		
regents, employees, agents, and volunteers (collectively, "the Released Parties") from and for any claims,		
demands, liability, lawsuits, injuries (including death), property damage, attorney's fees, expenses, costs,		
causes of action, judgments, or awards of any kind or	character ("Loss") that may accrue, arise, or otherwise	
exist because of my travel and participation in the Travel. I intend this release to include any Loss sustained by a		
third party through whom or on behalf of whom (or w	third party through whom or on behalf of whom (or whose estate) I may assert a claim, lawsuit, or cause of	
action. I understand and agree that this RELEASE, HOLD HARMLESS, AND INDEMNITY AGREEMENT EXPRESSLY		
RELEASES, HOLDS HARMLESS, CONTRACTUALLY BINDS ME TO INDEMNIFY (i.e., reimburse the Released Parties		
for any Loss they may sustain, resulting from a claim by a third party) and OTHERWISE EXONERATES THE		
RELEASED PARTIES FROM THE CONSEQUENCES OF THEIR OWN NEGLIGENCE, WHETHER THAT NEGLIGENCE IS		
THE SOLE OR CONTRIBUTING CAUSE OF MY LOSS. I int	tend this release, hold harmless and indemnity to be as	
broad and comprehensive as possible as I do not desire t	hat the Released Parties have any liability, directly to me,	
my spouse (if any), my child (if any), or indirectly to any	medical provider or insurer, arising from my participation	
in the travel.		
ASSUMPTION OF RISK		
My participation in the Travel is voluntary. I understand that through this Travel, I will spend time in, a foreign country. I have been put on notice that that this area may include an unstable government, civil war, ongoing intense crime or violence, and/or frequent terrorist attacks, and may be hostile to visitors from the United States. I understand that my participation includes a risk of personal injury, property damage, death or other Loss as described above. I hereby acknowledge that the U.S. State Department provides travel advisories at http://travel.state.gov/content/passports/english/alertswarnings.html . I have been advised to view alerts and warnings prior to and during my travel so that I can remain aware of any necessary safety precautions. I am electing to participate and travel at my own risk. On behalf of myself, my heirs, executors and administrators, I VOLUNTARILY ASSUME ANY AND ALL RISK OF LOSS as defined and described in the above Release, Hold Harmless and Indemnity Agreement. By signing below, I REPRESENT that I am OVER THE AGE OF 18, I have read and understood what is written above and that I VOLUTARILY bind myself to the Conditions stated herein. Signed on this the day of, 20		
Signed on this the day of, 20		
Signature Printed N	Name	
Address		
, 100, 200		

Lamar University – Travel Release for Travel Abroad (TO AREAS <u>WITHOUT A TRAVEL WARNING</u>* BY THE U.S. STATE DEPARTMENT)

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