

**ASSUMPTION OF RISK AND RELEASE FROM LIABILITY  
FOR TRAVEL TO *HIGH RISK* DESTINATIONS**

I, \_\_\_\_\_ [*traveler name*], intend to travel to \_\_\_\_\_ [whether one or more countries, "Destination"] from approximately \_\_\_\_\_ [*start date*] to \_\_\_\_\_ [*end date*]. In connection with my travel, I agree to the following:

1. I understand there is a U.S. Department of State warning about the Destination or it has a designation of "Reconsider Travel" or "Do Not Travel" (herein after "Travel Warning"), and I have read and understand the warning. I also have read and understand the Country Specific Information that the U.S. Department of State has prepared regarding the Destination. I intend to pursue my travel plans despite the Travel Warning and the University's suggestions that I defer my travel until the U.S. Department of State cancels or changes the Travel Warning. I understand that no one can guarantee my safety at the Destination. I will make myself aware of the contents of the Travel Warning and the U.S. government's recommendations to avoid certain areas and circumstances and will plan my travel and activity accordingly.
2. Travel to the Destination is not required in order to complete the degree program in which I am enrolled or as a condition of current or future employment. My decision to travel to the Destination is entirely voluntary.
3. I understand that certain risks are inherent in any international travel and may include, but are not limited to, war, terrorism, civil unrest, criminal activity, quarantine, detainment, exposure to communicable diseases, ill effects of unfamiliar food and water, incidents related to ground, air, or water transportation, adverse weather conditions, accident, catastrophic injury, death, damage to property, financial loss, loss of fees, and other physical, mental, and emotional injury. Furthermore, I understand these risks are substantially higher in Destinations with an active Travel Warning and Department of State may have limited ability to assist travelers in these Destinations. Finally, the Destination may have health and safety standards and support substantially below those enjoyed in the United States, and I recognize that I may be subjected to public health hazards, illnesses, injuries and even death. I understand all of these risks and assume them knowingly and willingly.
4. I have been advised that, before my departure, I must purchase University of Illinois International Travel and Health Insurance ("Insurance") from International Safety and Security that includes coverage for medical evacuation and repatriation of remains. I am responsible for obtaining recommended immunizations before traveling. If injured while participating in an activity not covered by the Insurance, I will be solely responsible for payment in full of all costs of medical care that I may receive overseas. I also understand that some medical facilities require payment before treatment and that I may be required to pay all costs, then seek reimbursement from the Insurance afterwards.
5. I agree, in behalf of my estate, heirs and personal representatives, to assume all the risks surrounding my travel to the Destination. I release the Board of Trustees of the University of Illinois, its employees, agents, assigns and cooperating institutions and their agents from, and indemnify them against, all present and future claims, losses and liabilities (including attorney fees) for personal injury (including death) and property damage that I may incur and for which I may become liable in connection with my travel to the Destination and resulting from any cause.
6. I acknowledge that this waiver supplements the University-sponsored Travel Abroad Assumption of Risk and Waiver signed by all students participating in travel abroad. Therefore, I continue to also be subject to that waiver as well.
7. I have read and I understand this Assumption of Risk and Release from Liability ("Release"). I understand this Release is a legal document and that I am free to consult with an attorney of my choosing before signing it. I voluntarily agree to this Release by signing below.

\_\_\_\_\_  
Traveler's Signature

\_\_\_\_\_  
Date

*Signature of parent or legal guardian is required if student traveler is under the age of 18 at the beginning of travel.*

\_\_\_\_\_  
Parent/Guardian Signature (if Traveler is under age 18)

\_\_\_\_\_  
Date