NAME OF PARTICIPANT:
ADDRESS OF PARTICIPANT:
EMAIL ADDRESS OF PARTICIPANT:
NAME/TITLE OF TRIP:
(referred to as "this Trip" throughout this agreement)
LOCATION(S) OF TRIP:
(referred to as "this Location" throughout this agreement)
DATE(S) OF TRIP: From: To:

PREAMBLE:

This Trip is an exceptional educational/working opportunity, but it is not without certain risks, dangers, hazards and liabilities to all participants. These include, but are not limited to, personal injury, death, property damage, expense and other loss(es), delay or inconvenience and **this Trip's** cancellation or curtailment. All participants taking part in **this Trip** are required to accept these and other risks as a condition of their participation in this program. The Risks set forth below are intended to enable participants to better understand the various risks involved in **this Trip.**

- Enactment of government regulations restricting travel inside or outside of this country or my ability to leave, travel through or return to any country including Canada. I understand that these regulations can be imposed or changed suddenly and that international transportation options could be reduced significantly, making it hard for me to travel or return to Canada. I also understand that the Government of Canada does not have plans to offer further repatriation flights;
- My insurance not covering my travel or medical expenses;
- Penalties, fines, criminal charges, imprisonment, etc. caused by my failure to comply with local or national regulations relating to an outbreak (whether known to me or not), including, but not limited to, requirements to wear protective equipment, self-isolate or quarantine.

I understand that the University of Calgary will not be responsible for any additional or increased costs related to taking this Trip and that those costs are mine alone. Such costs may include, but are not limited to increased personal costs, extending or cancelling my accommodations, escalated cost of travel or food, loss of non-refundable fees or expenses or any portion thereof.

I freely accept and fully assume all such risks, dangers and hazards and the possibility of personal injury, death, property damage or loss, resulting therefrom.

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In consideration of **The Governors of the University of Calgary** allowing my participation in **this Trip**, I agree as follows:

- TO WAIVE ANY AND ALL CLAIMS that I have or may have in the future against The Governors of the University of Calgary and its members, officers, employees, students, agents, volunteers and independent contractors (all of whom are hereinafter collectively referred to as "the Releasees");
 TO RELEASE THE RELEASEES from any and all liability for any loss, damage, injury or expense that I may suffer, or that my
- next of kin may suffer as a result of my participation in **this Trip** due to any cause whatsoever INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE OWED UNDER THE OCCUPIER'S LIABILITY ACT, RSA 2000 c. 0-4 AS AMENDED ON THE PART OF THE RELEASEES;

_____ (Initial here that you have read paragraph 2.)

- 3. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any damage to the property of, or personal injury to, any third party, resulting from my participation in **this Trip**;
- 4. I understand that it is my responsibility to learn as much as possible about the risks of **this Trip** and to weigh those risks against the advantages, and to decide whether or not to participate.

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In entering into this Agreement, I am not relying upon any oral or written representations or statements made by the Releasees, other than what is set forth in this Agreement.

I CONFIRM THAT I HAVE READ AND UNDERSTAND THIS AGREEMENT AND THAT I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE, WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST THE

Signed thisday of	
SIGNATURE OF PARTICIPANT	WITNESS SIGNATURE (Non Family Member)
	WITNESS NAME (please print)

RELEASEES.

This Agreement must be completed in full, without alteration, signed, dated and witnessed, and the paragraph Assumption of Risks must be completed including paragraphs 2 and 6 must be initialed before the participant may participate in this Trip.