Social Justice, Peace and Development: A Semester in India

Parent Liability Waiver From/Medical Permission Agreement

The undersigned, being a parent or guardian of _________________________________, a student at Gustavus Adolphus College, who has sought and received my permission to participate in the Social Justice, Peace and Development: A Semester in India program of Gustavus Adolphus College and Concordia College which I understand will necessitate the travel of my child from __________________ (home) to Bangalore, India to participate in said program, do hereby release and forever discharge Gustavus Adolphus College and Concordia College each officer, director, employee, trustee, servant or agent of either of them of and from any liability to me or my heirs, successors or assigns with respect to any act or omission of any of them in any respect to the participation of my child in the program described above.

I further agree that I will indemnify, defend and hold harmless Gustavus Adolphus College and Concordia College their staffs, employees, servants, representatives, trustees and agents from any claims of any nature made by my child or by me on behalf of my child which may arise in any way or in any way related to any activity of __________________________ (student’s name) in participation of the above described program.

I have read and understand the terms and conditions of this indemnification and release and agree and subscribe to them. My signature below also signifies that my son/daughter has sufficient health, accident disability and hospitalization insurance to cover him/her during participation in the program and I expect and recognize that none of the fee paid for this program goes toward the payment of such insurance, and that Gustavus Adolphus College and Concordia College do not have an obligation to provide me with such insurance.

Medical Permission Agreement. I hereby authorize physicians designated by the director of the program listed above to give medical treatment to my son/daughter/ward, including necessary surgery, anesthesia, or hospitalization. In the event of an emergency or injury to my son/daughter/ward, I hereby authorize the appropriate representative of the program to secure whatever treatment is deemed necessary. I waive any claim against the director or Gustavus Adolphus College or Concordia College which might arise from accident, injury, or illness while my son/daughter/ward is on the program.

Signature of Parent____________________________________ Date________________

Name (printed) ___________________________________________________________
Student Liability Waiver

The undersigned, being a student at Gustavus Adolphus College and applying for participation in the Social Justice, Peace and Development: A Semester in India program sponsored by Gustavus Adolphus College and Concordia College, and having the opportunity to gain certain academic credit through participation in said program, hereby forever releases Gustavus Adolphus College and Concordia College and each of them, and any officer, employee, director or agent thereof of and from any and all liability for any act or omission of any kind or character whatsoever and releases them from any costs, damages and claims or assertions of any kind with respect to which I or my heirs, successors or assigns may claim against them and specifically without limitation agree as follows:

1. The program director has the authority to establish rules necessary for the operation of the program and should the director decide that a student must be separated from the program because of violation of such rules, for disruptive behavior, or for conduct which could bring the program into disrepute, that decision will be final.

2. Program fees cover educational costs of the program. Because these costs are fixed, no refunds will be possible after the program departs from the United States.

3. I release Gustavus Adolphus College and Concordia College, any employee, servant, agent, directors thereof, from any liability for injury to myself or any damage to or loss of my possessions caused by acts or omissions of any hotels, carriers, fellow students, restaurants, educational organizations, persons, groups or organizations, including but not limited to Gustavus Adolphus College, Concordia College, their officers, employees, directors, agents or servants in connection with the work or study hereunder.

4. I assume any and all risk involved in this activity.

I have read the foregoing release and agreement and I accept the conditions stated therein.

Signature of Student _______________________________ Date _______________