



CONDITIONS OF PARTICIPATION

Classport INC and its partners have put together specific requirements for participation in its programs. Please complete the following condition of participation form by checking each statement and signing the bottom.

I. GENERAL CONDITIONS of Participation

- I understand that I must be 18 years or older to participate in CLASSPORT Faculty Led programs.
- I understand Classport staff may contact my home campus in case of an emergency situation.

II. Personal Health and Wellness Statement

- I understand that I take 100% responsibility for my physical and emotional health during my program abroad. I state that I have consulted with a medical doctor in regard to my personal medical needs and I have provided Classport with all medical data and other personal information necessary for a safe and healthy study abroad experiences. I agree to fully disclose to Classport (prior to start of program all physical, emotional or cognitive disorders that would potentially impact me or another program participant. I understand that this information will be used solely to assist the individual in participation in the study abroad program and will be kept confidential.
- I authorize Classport staff and its ground partners to obtain medical treatment in the event that I do not have the capacity to do so.

II. Travel Risk/ Release Statement

- I understand that living in or traveling through a foreign country may involved certain health and personal risk, including but not limited to crime, terrorism, war and serious bodily injury, or death, property damage, that may not be foreseeable. I recognize and accept those risks and agree to exercise reasonable and prudent care while abroad.
- I further understand that risk of travel include transportation delays, fare changes, reservations dishonors, lost or delayed luggage, natural disasters, and other circumstances beyond the control of Classport and its partners.
- I hereby release and hold harmless, Classport its employees, host families, ground partners, and other agents working on behalf of Classport programs from any and all claims and causes of action resulting from my participation in the program. This

waiver and release shall bind me my estate, heirs and personal representatives and legal guardians.

- I have received information about travel insurance from Travel insured international. Classport highly recommends the purchase of travel insurance prior to departure.

II. Photo Release

Classport and its partners often utilize photos of students on programs for various promotional materials. In addition we ask students to post their photos on our Classport International Facebook Page.

- I authorize Classport to utilize photos in which I appear for promotional materials for its programs
- I do not authorize Classport to utilize photos of in which I appear for promotional materials.

Student Name: _____

Program: _____

Student Signature: _____

Date: _____

Please fill out form and send to info@classportinc.com