

## CUNY Release Agreement for Activities in a Country under a Qualifying Warning

**Individual Petitioners:** *If your International Travel Warning Waiver Petition is approved, for finalization you must submit this signed Release Agreement to your home campus Study Abroad Office/International Education Liaison.*

**Campus Directors of CUNY Group Trips:** *If the International Travel Warning Waiver Petition is approved, for finalization the Campus Director must collect this signed Release Agreement from all student, staff and faculty trip participants after completing the fields on page 1.*

**Trip Participants (individual and participants in group CUNY Trips):** *Please submit a hard copy (or copies) to the College Study Abroad Office/International Education Liaison. This waiver is required in addition to all other travel requirements for trips to countries under a Qualifying Travel Warning, which must also be approved by the Chief Academic Officer.*

Dates and Destination(s) of Trip:

I am voluntarily participating in the activity described above, and affirm that my participation is not required. I acknowledge that this travel experience may expose me to significant foreseeable risks, including those outlined in the U.S. Department of State Travel Warning and/or CDC Level 3 Travel Warning for my destination(s), which I have carefully reviewed, as well as unforeseeable risks. I acknowledge that the City University of New York is not responsible for my safety and I assume full responsibility for all risks associated with my travel.

I understand that it is my responsibility to follow through with all risk mitigation measures described in the International Travel Warning Waiver Petition associated with this trip, as well as any additional measures specified by the Chief Academic Officer as a condition of approval.

I understand that I must complete all applicable requirements under the [CUNY International Travel Guidelines](#), including CUNY-GO registration and coverage for all travel dates by the CUNY CISI policy. I am also required to register for updates on my destination(s) from the U.S. State Department's Smart Traveler Enrollment Program (STEP) at <https://step.state.gov/step/>, in order to stay informed about changing conditions in my destination(s). (If I am traveling as part of a CUNY Trip, these steps may be done on my behalf by the trip's Campus Director). If I am not a U.S. citizen, I understand that CUNY strongly encourages me to also register with the nearest embassy or consulate of my home country to my destination(s).

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However, I also understand that the security evacuation insurance included in the CISI policy is a benefit defined by the insurer, not the insured. If I request security evacuation services at a point when the insurer has not offered these services based on a significant escalation of danger, these services, if they can be rendered, will not be covered by the insurance policy and I will be personally responsible for all expenses. Moreover, because this insurance is not designed for travel to high-risk destinations, it is less likely that CISI and its affiliate providers will be able to provide direct payments for medical treatment, and it is my responsibility to submit documented claims for reimbursement.

I hereby release, waive, discharge and covenant not to sue The City University of New York, its trustees, officers, agents or employees (hereinafter referred to as “releasees”) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or relating to any loss, damage or injury, including death, that may be sustained by me, or to any property belonging to me, in connection with travel and/or study at the destination(s) described above. I voluntarily assume full responsibility for any risks of loss, property damage or personal injury, including death, that may be sustained by me, or any loss or damage to property owned by me, as a result of my travels. It is my express intent that this release shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representatives, if I am deceased, and shall be deemed as Release, Waiver , Discharge and Covenant Not to Sue the above named releases.

Traveler’s Signature

Date

Traveler’s Name

*(required for all students under 18)*

Parent/Guardian Signature

Date

Parent/Guardian Name