

## **UNC Asheville Study Abroad/Study Away Release of Liability**

THIS IS A LEGAL DOCUMENT WHICH INCLUDES A RELEASE OF LIABILITY.  
PLEASE READ IT CAREFULLY BEFORE SIGNING IT.

I, \_\_\_\_\_ (Please print your full name), have applied and been accepted for the \_\_\_\_\_ study abroad program. I understand that this program will expose me to many risks associated with foreign travel, residence in a foreign country, and participation in a study program conducted at that location. I fully accept this possibility of risks and assume all risks associated with this program.

I acknowledge that there are other opportunities for study and travel and that I have chosen to participate in this program freely and voluntarily.

I therefore agree that as part of the consideration and part of the payment for participation in this program and its associated activities, I specifically and completely release, hold harmless and indemnify the State of North Carolina, The University of North Carolina, and the University of North Carolina at Asheville and all their officers, employees, and agents from all liability, including negligence and other causes of action, debts, claims, and demands of every kind which I have now or which may arise out of or in connection with my travel or participation in this program and its associated activities. I further agree to release, indemnify and hold harmless the parties listed above from any claim, loss, liability, damage, or cost, including attorney fees that they may incur due to my participation in this program or activity.

This release, hold-harmless agreement, indemnification and assumption of risk shall be binding on me, my heirs, my assigns, members of my family (including minors traveling with me), my executors, my administrators, and my personal representatives.

I have read this release, understand its terms, have had an opportunity to consult with legal counsel, and therefore now execute it voluntarily and with full knowledge of its significance.

I am an adult, over eighteen (18) years of age, and am physically capable of participation in this program and its associated activities. I certify that no oral or other written promise, agreement or representation concerning safety or liability has been made to me.

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Signature

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Date