

STUDENT REQUIREMENTS FOR JUILLIARD SPONSORED TRAVEL

Juilliard imposes certain requirements on students traveling in connection with various Juilliard-sponsored programs or events. Students must complete these requirements if the program or event:

- Takes place outside the five boroughs of New York City, regardless of whether an overnight stay is involved;
- Has a sponsoring department or was otherwise organized by Juilliard;
- Involves School-provided or School-organized transportation and/or accommodations;
- Is paid for or financed by the School; and
- Has an individual (usually from the originating Juilliard department) designated as a "Trip Leader."

All students traveling in connection with a Juilliard-sponsored program or event meeting the above criteria must complete the following steps **prior** to their departure: a) review and comply with the requirements below (students must initial where indicated); b) review and sign the *Student Travel Waiver: Assumption of Risk & Release of Liability* and provide the requested emergency contact information; and c) return the completed forms to the designated Trip Leader. **Required registration for the trip will not be valid until you return the forms to the Trip Leader.**

1. Students participating in overnight trips are required to have adequate medical coverage. The Trip Leader should collect insurance information from each student prior to departing on the trip. It is the responsibility of the student to have proof of medical insurance on his/her person during the trip.
 - **For international trips:** All participants **must** have International Travel Insurance. Participants should consult their Trip Leader to ensure that they have appropriate coverage.
2. International students traveling abroad **must** consult with the Office of International Advisement via email at uia@juilliard.edu or by phone at 212-799-5000 x 358 to ensure they have proper documentation to travel and perform, if applicable. International students who travel abroad also need to ensure that they have the proper documentation to re-enter the U.S.
3. All students **must** use School provided transportation to and from the event and **must** stay in the accommodations that are organized and provided by the School as part of the trip, unless an exception is made for a specific reason and approved in writing by the Trip Leader and/or the Associate Dean for Student Development or their designees.
4. If the student has a medical condition, it is the student's responsibility to have all necessary medications during the trip and to administer the prescribed dosage. The student may inform the Trip Leader of the medical condition if he/she is comfortable doing so or thinks it necessary/important to alert the staff; however, all responsibility for medications remains with the student.
5. Groups of students should travel together. It is strongly recommended that students be with at least one other student during the trip.
6. Questions regarding trip requirements may be directed to the Associate Dean for Student Development, ext. 7315.

Initial here before continuing to *Student Travel Waiver*: _____

STUDENT TRAVEL WAIVER: ASSUMPTION OF RISK AND RELEASE OF LIABILITY

THIS IS A RELEASE OF LEGAL RIGHTS –
Please read carefully before signing.

Name of Participating Student: _____

Description/Purpose of Trip: _____

Sponsoring Department/Trip Leader: _____

Dates of Travel & Destinations: _____

I am a student at The Juilliard School ("Juilliard") and have chosen voluntarily to participate in the trip described above (the "Trip"). ("Trip" is understood to include all activities at destinations and all travel to and from such destinations.) I was not required to participate in this Trip as a condition of receiving my degree. This agreement confirms my understanding of the following:

1. Risks of Trip. I understand that participation in the Trip may involve risks not found in study at Juilliard's New York City campus. These include risks involved in traveling to, from and within the Trip destination. I recognize that I may be subjected to these potential risks, including without limitation illnesses, injuries and death. I understand that Juilliard does not represent or act as an agent for, and cannot control the acts or omissions of, any host family, employer, transportation carrier, hotel, tour organizer or other provider of food, goods or services in connection with the Trip. I further understand that Juilliard cannot warrant the safety or convenience of the circumstances under which I will be living or working. I have made my own investigation of the risks involved in the Trip, understand these risks and assume them knowingly and willingly. I will take every precaution to safeguard my health and to protect my personal belongings from damage or theft while participating in the Trip. I acknowledge that Juilliard recommends that I never travel alone, particularly at night. Traveling alone, especially at night, may present additional dangers to my safety and well-being. I understand that, although Juilliard has organized the Trip, it cannot eliminate all risks or guarantee my safety while I am participating in the Trip. I have evaluated these risks and have made the independent judgment to participate in the Trip.

[Students traveling internationally must also acknowledge and initial the following two paragraphs:

I understand that there are additional risks involved in international travel, including risks arising from foreign political, legal, medical, social and economic conditions; different standards of design, safety and maintenance of buildings, public places and conveyances; and different weather conditions. I also acknowledge that in working, living and traveling in cities abroad, I may experience problems associated with urban living, including increased crime, pollution, high population density and/or standards of living and health standards that are different from those to which I am accustomed in the United States. _____ (Initial here.)

I have read and understand all information on the U.S. State Department website (<http://travel.state.gov>) about the country or countries to which I am traveling, including without limitation the U.S. Department of State Consular Information Sheet and the State Department Warning (if applicable). I have also reviewed the U.S. Centers for Disease Control health advisory information relating to travel abroad found at <https://wwwnc.cdc.gov/travel/> and any additional information available from the World Health Organization website (<http://www.who.int/en/>). I understand that I am solely responsible for obtaining any necessary vaccinations or immunizations required by the countries to which I am traveling and that I must obtain international travel insurance prior to my departure. With knowledge of this information, I have made the independent judgment to participate in the Trip. _____ (Initial here.)]

2. Health Insurance; Medical Care; Health and Safety Concerns. I have read and understand the limitations of the School-provided student health insurance policy benefits for travel, and I have reviewed any and all other insurance policies that may currently cover my travel. I understand the limitations of that coverage with regard to my medical care, health and safety needs. I have determined that this insurance is adequate to cover injuries or illnesses that I may sustain while participating in the Trip.

I acknowledge that I will be solely responsible for payment in full of all costs associated with any medical care I may receive while travelling. I authorize Juilliard to obtain appropriate medical care for me in the event that I am unable to obtain it for myself. I further agree to hold harmless and indemnify Juilliard and all persons participating in any such medical care for any and all actions taken to provide necessary emergency medical assistance to me during the Trip. I also understand and agree that if I experience serious health problems, suffer an injury, or am otherwise in a situation that raises significant health and safety concerns, then Juilliard may contact my parents or any other person whose name I have provided as my "emergency contact." I understand that Juilliard ordinarily will not initiate such contact without first having a discussion with me.

3. Standards of Conduct. I recognize that I assume an important personal obligation to conduct myself in a manner compatible with local laws and regulations; with Juilliard's policies for student conduct (including without limitation those set forth in the *Student Handbook* and in any Trip-specific materials); with the policies of my host institution (if any); and with any instructions given by the Trip leaders, The Juilliard School or its agents. I promise to act responsibly and will become informed of, and will abide by, all such laws, regulations, policies and standards. I will comply with Juilliard's policies, standards and instructions for student behavior. I agree that

Juilliard has the right to enforce all standards of conduct described above.

I understand that if I am dismissed from the program for any reason, before or during the Trip, I will be responsible for any additional expenses incurred as a result of my dismissal. I also understand that no refunds for submitted funds related to the Trip, if any, will be given under any circumstances.

4. Trip Protocol. I acknowledge that I have read and understand the *Student Requirements for Juilliard Sponsored Travel* and have complied with its terms. I understand that these requirements must be completed prior to my departure, including providing the emergency contact information requested below.

5. RELEASE OF LIABILITY. Knowing the risks described above, I agree, on behalf of myself, my family, my heirs, executors, administrators, assigns and personal representatives, to assume all the risks and responsibilities relating to my participation in the Trip. To the maximum extent permitted by law, I release, hold harmless and agree to indemnify Juilliard, its officers, administrators, trustees, employees, representatives, students, sponsors, agents and other Trip participants from and against any present or future claims, losses, liabilities, costs and expenses for injury to person or property, or for any other damage which I may suffer or for which I may be liable to any other person, related to my participation in the Trip (including periods in transit to or from my destination), resulting from any cause, including but not limited to negligence on my part or on the part of any of the released parties.

I certify that I am age 18 or older, or the parent or legal guardian of the minor named above, and have the legal right to consent to these terms. I have fully read this Assumption of Risk and Release of Liability and understand its terms, contents, meaning and impact. I understand and agree that no oral or written representations can or will alter the contents of this document. I agree that this Assumption of Risk and Release of Liability and any disputes arising hereunder or in connection with the Trip shall be governed by the laws of the State of New York without regard to conflict of laws principles. I sign this Assumption of Risk and Release of Liability voluntarily and with full knowledge of its significance and a willingness to be bound by its terms. I understand and agree that by signing and submitting this Assumption of Risk and Release of Liability, I am affirming the accuracy of the information contained therein. If I am under the age of 18, this document must also be signed by my parent or guardian on my behalf with the same legal effect.

Name - _____ Date - _____
Student

Name - _____ Date - _____
Parent/Guardian (if under 18)

UNITED STATES (U.S.) EMERGENCY CONTACT INFORMATION:

First Contact

Name: _____ Relationship: _____

Telephone (home): _____ Telephone (cell): _____

E-Mail Address(es): _____

Second Contact

Name: _____ Relationship: _____

Telephone (home): _____ Telephone (cell): _____

E-Mail Address(es): _____