LAMAR UNIVERSITY INTERNATIONAL TRAVEL RELEASE, HOLD HARMLESS, AND INDEMNITY AGREEMENT FOR TRAVEL TO AREA WITH U.S. STATE DEPARTMENT TRAVEL WARNING

I, ______, have requested and voluntarily choose to participate in

the Lamar University travel to	("Travel") during the dates of
through In con	sideration for Lamar University's ("the University") funding and/or
facilitating the Travel, I (for myself, my he	irs, executors and administrators) HEREBY RELEASE, HOLD HARMLESS,
DISCHARGE, AND OTHERWISE AGREE TO	INDEMNIFY the University, the Texas State University System, their
regents, employees, agents, and volunte	eers (collectively, "the Released Parties") from and for any claims,
demands, liability, lawsuits, injuries (in	cluding death), property damage, attorney's fees, expenses, costs,
	of any kind or character ("Loss") that may accrue, arise, or otherwise
	on in the Travel. I intend this release to include any Loss sustained by a
· · · ·	of whom (or whose estate) I may assert a claim, lawsuit, or cause of
G	RELEASE, HOLD HARMLESS, AND INDEMNITY AGREEMENT EXPRESSLY
	TUALLY BINDS ME TO INDEMNIFY (i.e., reimburse the Released Parties
	from a claim by a third party) and OTHERWISE EXONERATES THE
	ENCES OF THEIR OWN NEGLIGENCE, WHETHER THAT NEGLIGENCE IS
	MY LOSS. I intend this release, hold harmless and indemnity to be as
·	do not desire that the Released Parties have any liability, directly to me,
	lirectly to any medical provider or insurer, arising from my participation
in the travel.	
ASSUMPTION OF RISK	
My participation in the Travel is vo	luntary. I understand that through this Travel, I will spend time in
	that has been designated as having a Travel Warning by the U.S. State
	that such designation means that this area may include an unstable
	me or violence, and/or frequent terrorist attacks, and may be hostile to
	tand that my participation includes a risk of personal injury, property
	above. I hereby acknowledge that the U.S. State Department provides
-	<u>/content/passports/english/alertswarnings.html</u> . I have been advised to uring my travel so that I can remain aware of any necessary safety
- ·	nd travel at my own risk. On behalf of myself, my heirs, executors and
	ANY AND ALL RISK OF LOSS as defined and described in the above
Release, Hold Harmless and Indemnity Ag	
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By signing below, I REPRESENT that I am O	OVER THE AGE OF 18, I have read and understood what is written above
and that I VOLUTARILY bind myself to the O	Conditions stated herein.
Signed on this the day of	, 20 .
	
Signature	
Printed Name	Address