NAME OF PARTICIPAN	NT:
ADDRESS OF PARTICI	PANT:
EMAIL ADDRESS OF P	ARTICIPANT:
NAME/TITLE OF TRIP:	(referred to as "this Trip" throughout this agreement)
LOCATION(S) OF TRIP	: (referred to as "this Location" throughout this agreement)
DATE(S) OF TRIP: From	m: To:
participants. These includ inconvenience and this T risks as a condition of the understand the various ris	vith your physician regarding any pre-existing physical or mental health conditions you may have, that
	KS: further risks mentioned in the most current Government of Canada - Travel Advisory(s), which I am required my participation in this Trip.
	ed the Government of Canada - Travel Advisory(s) for this Location(s) which indicates it was Last Updated
I have read and understoo	ed the International SOS Travel Restrictions for this Location(s) on the following date:
	dangers and hazards to which I may be exposed to while participating in this Trip . I understand that it is my ned about the inherent risks in this Trip and to take appropriate precautions to avoid risks and dangers. Risks

Any manner of harm, injury, illness, death or property damage suffered by or resulting from:

- Loss or damage of personal property by any means including, but not limited to, theft, vandalism, fire, or water;
- Use, misuse, non-use and failure of any equipment;

include, but are not limited to:

- Travel by motor vehicle, watercraft, aircraft or any other means of transportation resulting in accidents, injuries or delays, poor road conditions, etc.;
- Medical facilities in **this Location** may be of a lower standard and/or may not be available or easy to access;
- Diseases that might not be common in Canada or that the traveler may not be familiar with or vaccinated against;
- Contact with wildlife, domestic or production animals that may carry diseases and parasites or whose behaviour may result in injuries to the traveler;
- Different environmental and weather conditions;
- The laws of **this Location** may be significantly different than those in Canada;
- The crime rate and criminal activity may be significantly higher or different than in Canada;

Any manner of harm, injury, illness, death or property damage suffered by or resulting from an outbreak or increased cases of an Infectious Disease, Bacterial or Viral, including COVID-19 resulting in:

- Enactment of government regulations restricting travel inside or outside of this country or my ability to leave, travel through or return to any country including Canada. I understand that these regulations can be imposed or changed suddenly and that international transportation options could be reduced significantly, making it hard for me to travel or return to Canada. I also understand that the Government of Canada does not have plans to offer further repatriation flights;
- My insurance not covering my travel or medical expenses;
- Penalties, fines, criminal charges, imprisonment, etc. caused by my failure to comply with local or national regulations relating to an outbreak (whether known to me or not), including, but not limited to, requirements to wear protective equipment, self-isolate or quarantine;
- I understand that it is my responsibility to consult with my department/unit head prior to travel to ensure that I can make alternate arrangements for work if I am quarantined.

I understand that the University of Calgary will not be responsible for any additional or increased costs related to taking this Trip and that those costs are mine alone. Such costs may include, but are not limited to increased personal costs, extending or cancelling my accommodations, escalated cost of travel or food, loss of non-refundable fees or expenses or any portion thereof.

I freely accept and fully assume all such risks, dangers and hazards and the possibility of personal injury, death, property damage or loss, resulting therefrom.

I CONFIRM THAT I AM 18 YEARS OF AGE OR OLDER, THAT I HAVE READ AND UNDERSTAND THIS AGREEMENT AND THAT I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM ACCEPTING FINANCIAL RESPONSIBILITY FOR ANY DAMAGE TO THIRD PERSONS OR THEIR PROPERTY THAT I MAY CAUSE.

Sig	gned thisday of	,	·
SIC	GNATURE OF PARTICIPAtnoxe.		
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