Release and Hold Harmless Agreement
Participation Required for Travel during COVID-19 Pandemic
as a Student Registered at Drexel University

By signing this Release and Hold Harmless Agreement, I hereby agree to the following:

I acknowledge that I have been made aware of the risks of travel at this time and, more specifically of the potential health risks to me due to COVID-19 and, despite this warning and strong discouragement from Drexel to travel, I have made the decision to participate in domestic Drexel-affiliated travel as a registered Drexel University student.

I acknowledge that this Release and Hold Harmless Agreement covers my travel to any and all destinations during the planned activity or applicable sport season (“program”). The acknowledgements and agreements in this Release and Hold Harmless apply to each trip.

I acknowledge that I am voluntarily participating in travel and that Drexel recommends that I only partake in travel if I am in good health and am free from any physical or mental ailment or disability requiring medical, surgical, or other care or treatment which might endanger my health or safety or the health and safety of those with whom I may come in contact. I also understand that Drexel recommends that I speak to my physician prior to traveling to obtain medical clearance to travel. If I am prescribed any medication, it is my responsibility to bring the necessary quantity of all legal, prescribed medication needed for the duration of my travel, and to take said medication as prescribed by my physician.

I agree to check before my departure how my medical health insurance coverage will respond with respect to my location of travel. I understand that Drexel University is not responsible for my safety, and I assume full responsibility for all risks associated with my participation in the travel. I further agree to comply with all safety and security recommendations made to me by Drexel University.

I know that I am not required to participate in this program to satisfy any Drexel University requirement.

During travel, I understand that I will be subject to all local laws and regulations and that these laws and regulations could impact travel departure capabilities, access to transportation, business operations, free movement, and more. Drexel, may be limited in providing assistance to me in order to abide by, or should I fail to abide by, any such laws and/or regulations. I understand that it is my responsibility to be aware of these laws and regulations and to plan accordingly or defer travel if such laws or regulations would limit the successful completion of my intended travel purpose.

As a traveler, I accept that I may incur additional fees or travel costs if travel is cancelled, preventative quarantine is required, regular operations are suspended, my stay is extended as a result of travel restrictions, or for other reasons. Drexel recommends that I consider purchasing refundable airline tickets and/or trip cancellation insurance.

I understand that Drexel reserves the right to revoke any travel approval and recall travelers and that, in such an event, the monies I have paid will not be fully refundable and, depending upon the circumstances, I may receive no refund at all. I agree to accept these risks.

I acknowledge that it is my responsibility to secure the necessary supply of masks, sanitizing products, and/or other related supplies that may be required in order to access transportation, appear in public, or visit any operating establishments during my travel.

I understand that Drexel recommends travelers, even those who are vaccinated, take precautions to prevent infection, including wearing a mask when in indoor settings with others who are either unvaccinated or whose vaccination status is unknown.
I understand that COVID-19 case counts vary from state to state and that I should be aware of current case counts for my
destination which can be reviewed at the CDC.gov website: https://covid.cdc.gov/covid-data-tracker/#cases_commmunity. I
have familiarized myself with the Centers for Disease Control and Prevention (CDC http://www.cdc.gov) guidelines and
recommendations for travel and the state public health recommendations for my destination and return location.

I agree to the following conditions for my participation:
  I will review all pre-departure materials provided by Drexel and the sponsoring program provider.
  I will get tested for COVID-19 72 hours or less prior to my departure even if it is not required for travel.

I understand that, unless I have been granted a religious or medical exemption by the University, I am required to be fully
vaccinated for COVID-19 with a vaccine authorized by either the WHO or US FDA prior to departure. I further
understand that, even if fully vaccinated for COVID-19, I may still become infected with COVID-19, and I am willing to
accept this risk. If I have a University-approved medical or religious exemption, I acknowledge that there are significant
risks to me in engaging in travel, and I am willing to accept those risks. I also understand that others who are traveling
with me may not be vaccinated because they have been granted a religious or medical exemption. I acknowledge that
there are risks to me in traveling with those who may be exempt from the vaccine requirement, and I am willing to accept
those risks.

In light of the above, I hereby release, hold harmless, and forever discharge Drexel University and its employees and
agents from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any
loss, property damage, or personal injury, including death, that may be sustained by me or any property belonging to me
while participating in this educational program/voluntary trip during any period when there is a current travel advisory in
effect for the domestic destination(s) where I intend to travel and study or participate in a voluntary program.

This Release and Hold Harmless Agreement is binding on myself, my heirs, my assigns, and personal representatives. I
acknowledge that I am at least 18 years old, or, if not at least 18 years old, I understand that my parent or guardian must
also sign this form where indicated to demonstrate his/her/their own agreement and understanding of the risks of travel for
University-affiliated activities.

______________________________   __________________
Student Signature     Date

___________________________________
Print Student Name

______________________________   __________________
Signature of Parent/Guardian    Date
(if student is younger than 18)

___________________________________
Print Parent/Guardian Full Name