**NEW YORK UNIVERSITY**

**DOMESTIC TRAVEL RELEASE**

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Full Name (First, Last) University ID Number (N12345678)

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City, State of Travel Dates of travel outside of New York

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Program Title

**Circle One**

Conference Competition Capstone Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Acknowledgement**

I plan to travel from [*New York, New York*] to [*insert destination*] from [*insert start date of trip*] to [*insert end date of trip*], as described more fully in the proposed itinerary attached as Exhibit A (the “Program”). I understand that New York University (the “University”) is not insuring or guaranteeing, in any manner, my safety from personal injury or any other loss or damage that may occur as a result of the Program. I understand that participating in the Program presents risks to me and my personal property. Specifically, I acknowledge that:

1. The University is not responsible for my losses, illnesses, injuries or disabilities or for conditions I experience during the Program or while traveling to the Conference by automobile.
2. The University is not responsible for my personal effects, either in transit or at final destinations.
3. I will register with NYU Traveler (<http://www.nyu.edu/life/travel-and-transportation/nyu-traveler.html>) in advance of the Program.
4. Prior to the Program, I will inform an appropriate representative of the University of any information regarding my health, or physical or mental condition that may be relevant to my participation in the Program or any travel during the Program.
5. I am bound by and will comply with all applicable laws and the University’s policies and procedures during the Program.

I have made my own investigation of the risks described above, understand these risks and assume them knowingly and willingly. With full knowledge of the risks and liabilities associated with the Program, I have made the independent judgment to participate voluntarily in the Program.

**Release and Waiver of Liability and Covenant not to Sue**

***I agree the University is not responsible if anything happens to me or to my property in connection with my participation in and travel to the Program. Knowing the risks and dangers associated with the Program and in consideration for being permitted to participate in the Program, I also agree, to the maximum extent permitted by law:***

1. ***to release and discharge the University from any liability or responsibility for any personal or bodily injury (including death), and for any damage to or loss of property, however caused, that I suffer as a result of or in connection with my participation in the Conference or any related or independent travel , including, but not limited to, any injury, loss or damage resulting from or arising out of the negligent acts or omissions of members of the faculty or administration or other employees, agents, or servants of the University; and***
2. ***not to raise any claim or institute any legal action or proceeding against the University that I have ever had, now have, or may have in the future or which my heirs, executors, administrators, or assigns may have, or claim to have, for any cause of action that may result from or arise out of my participation in the Conference or any travel related to the Program, including, but not limited to, any cause of action that may result from or arise out of the negligent acts or omissions of members of the faculty or administration or other employees, agents or servants of the University.***

All references to the University in this form will include, New York University and its affiliates, and all provisions of this Travel Release will inure, to the benefit of, the University and its affiliates, and their trustees, officers, employees, agents, servants and representatives.

This Travel Release will be governed by and construed in accordance with the laws of the State of New York, United States, applicable to contracts entered into and intended to be performed solely within the State of New York. I will submit to the jurisdiction of the federal and state courts located in New York County, New York State, for the resolution of disputes arising hereunder or relating hereto, regardless of the place of execution hereof.

I have read this document and understand its contents. Representatives of the University have answered any questions related to the Program or this Travel Release to my satisfaction. I have full authority to execute this Travel Release and have executed this Travel Release voluntarily and of my own free will.

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Print Name Date of Birth

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Address City State Zip Code

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Signature Date

**Exhibit A – Itinerary**