

Suffolk University
IB 550 TC2 Spring 2010
(UG) Belgium/ Austria
Travel dates: May 9-18, 2010

Name _____ Student Id# _____

Daytime Phone _____ Suffolk Email _____

Registration opens November 2nd, 2009 at 10am and closes on November 13th, 2009 at 4:00pm
(Daily registration during this period will take place from 9:00am thru 5:00pm)

Please submit this form along with your \$500 deposit to Carol Medina (617-305-1705), 12th Floor, 73 Tremont Street.

➤ Please write your Suffolk ID number in the Memo section of the check.

Please read the following information, Initial each statement and sign below:

____ I understand that the total seminar fee of \$3,900 Includes airfare, visa, hotel, and most food.

____ I understand that the \$500 dollar seminar fee deposit is NON-Refundable after airfare has been purchased, unless Suffolk University cancels the course.

Courses with fewer than 15 students will be cancelled.

____ I accept the following schedule:

- The \$500 deposit must be a check or money order to SUFFOLK UNIVERSITY (NO CASH!) and is due by November 13, 2009.
- The remaining balance will be billed by the bursar's office.
- The total seminar fee is non-refundable after the airfare has been purchased.
- Tuition for this 3 credit course is in addition to the seminar fee and will be paid according to the University tuition schedule.

Student responsibilities:

1. Attend all scheduled class sessions.
2. Pay both tuition and the seminar fee for this 3 credit course.
3. Students are required to travel with the group departing from Boston and returning to Boston, or as otherwise designated by the Dean's office.
4. Register with International SOS. Your professor will explain that you must complete both the travel section and the health care section.
5. Be on time at Logan with a valid passport for departure.
6. Maintain health insurance and carry your card. (Check to make sure health insurance covers you while you are in the countries visited on this travel seminar. You may want to consider purchasing supplemental insurance.)
7. Have your green card, if applicable.
8. Have your visa to study/work in the United States (International Students).
9. Have the immunizations for countries being visited. (Please check with your personal physician or with the Center for Disease Control, website www.cdc.gov.)
10. Have all documentation to enter all visited countries, as well as to re-enter the United States upon completion of the seminar.
11. Suffolk University reserves the right to make cancellations, changes or substitutions in the agenda, course, faculty, flight arrangements and other services, in the case of emergencies or changed conditions as deemed desirable based on the interests of the University, the group and the academic quality of the course. Students agree to assume any and all risks associated with such cancellations, changes, substitutions or other modifications to any arrangements as described above, including but not limited to interference with other travel plans they might make outside of this seminar.
12. While a participant of this course, students are fully subject to University rules, regulations, and policies. (You must adhere strictly to such rules, regulations and policies during your participation. There will be no refund for any students dismissed from the course.)
13. Students are responsible for obtaining and keeping safe passport, visa, money, traveler's checks, jewelry, and all other property.

Signature _____ Date: _____

As a student in the Sawyer Business School, College of Arts and Sciences, Or Other _____, in order to participate in the travel seminar to _____, between _____, 2010 and _____, 2010, the undersigned student makes the following agreement:

The student recognizes that there may be risks involved during the travel seminar. The nature of the risks may not always be readily ascertainable. Suffolk University is not prepared to analyze or make judgments of these risks for the student, nor is Suffolk University financially able to assume liability or legal responsibility for any damages suffered by a student arising out of any activities on the trip.

In addition, the University's general liability policy covers only employees of the University and does not extend to students. Therefore, students are wholly responsible for their own actions and realize that the University will not provide coverage for any damage they may cause to others.

The student hereby releases, disclaims and exonerates Suffolk University from any and all liability for any and all injuries, losses, damages, or other adverse consequences arising directly or indirectly from participation in the travel seminar, regardless of the source or nature of the cause thereof.

Print Name _____ Signature _____

Home Address: _____ Date: _____

Emergency contact Information:

Name: _____

Address: _____

Phone: Home _____

Cell: _____

To be completed by the SBS Undergraduate Office: CAS Students MUST BE APPROVED by their CAS advisor!

Major: _____ Year: Sophomore Junior Senior

GPA: _____ Comments: _____
(Minimum 2.5 GPA required)

UG Office Signature: _____ Date: _____

CAS Office Signature: _____ Date: _____