

## OFF-CAMPUS LEARNING

### CONSENT AND RELEASE AGREEMENT

In consideration for being permitted to participate in an off-campus field trip or study experience (“off-campus experience”) offered by Columbus College of Art & Design (“the college”) or any other provider of such off-campus experiences (“the provider”), I hereby agree to the following:

I waive and release any and all claims, demands or causes of action I or anyone on my behalf may have against the college and its agents, including any person or entity employed or utilized by the college and/or the provider, for any injury, loss, damage, accident, delay, expense or other liability suffered by me or my property participating in an off-campus experience, whether such injury, loss, damage, accident, delay expense or other liability results from (i) events beyond the college’s and/or the provider’s control, (including without limitation acts of God, war, strikes, incidents of violence, international calamities or crises, sickness or quarantine, government restrictions or regulations); (ii) the use of any vehicle; (iii) the selection by any agents of the college or provider to use any transportation, accommodation, restaurant, school, university, firm, agency, company, or individual in connection with the college or provider sponsored activities; (iv) the negligence of the college or its agents, including any person or entity employed or utilized by the college and the provider; or (v) some other cause.

I recognize that there are inherent risks in all domestic and international travel, including risks of unanticipated and unexpected dangers, and by participating in the off-campus experience, I willingly assume such risks. I understand that the college is not responsible for any injury or loss whatever suffered by me during periods of independent travel (which I understand and agree may be unsupervised) or during any absence of mine from the provider or from the activities involved.

I approve and consent to the Off-Campus Learning staff, faculty, and related administrators, as well as related faculty and staff at the institution I will be visiting, having all information available regarding any academic, emotional, medical, or behavioral problem that I may be experiencing at Columbus College of Art & Design. This may include medical and emotional history. I understand that this information will be shared confidentially only with the faculty or staff members responsible for the program for which I have applied, for the purpose of evaluating my qualifications for study on the program specified on this application.

I hereby grant the college and its agents full authority to take, and consent in advance to, whatever actions they may consider to be warranted under the circumstance regarding my health and safety, and I fully release each of them from any liability for such decisions as may be taken in connection therewith. I authorize the college and its agents, at their discretion, to place me, at my own (or my parents’) expense, and without my further consent, in a hospital within or outside the United States for medical services and treatment, or, if no hospital is readily available, to place me in the hands of a local medical doctor for treatment which such doctor believes is necessary. As deemed necessary or desirable by the college and its agents, I authorize them to transport me back to or within the United States by commercial airline or otherwise at my own (or my parents’) expense for medical treatment. In any case, the college may take whatever action it deems, in its sole discretion, necessary and in my best interest, including, without limitation, transporting me back to or within the United States or out of a foreign country at my own (or my parents’) expense, due to any political unrest, personal emergency or other event. In the event the college or its agents advance or lend any monies to me or incur special expense on my behalf while I am studying off campus, I (and my parents) agree to make immediate repayment to such party upon my return to the United States or to campus.

I acknowledge that the college and/or the provider have rules and standards concerning student behavior. I have read and understood all college and/or provider rules and standards concerning student behavior or I have had such rules and standards explained to me as the case may be. I will comply with the college and/or the provider's rules, standards, and instruction for student behavior. I hereby waive and release all claims against the college and its agents arising at a time when I am not under the supervision of the college or its agents or arising out of my failure to remain under such supervision or to comply with such rules, standards and instructions; and I agree to indemnify the college and its agents against any consequences thereof. I agree that the college shall have the right to enforce appropriate standards of conduct and that it may at any time terminate my participation in the off-campus experience for failure to maintain these standards or for any actions or conducts which the college, in its sole discretion, considers to be incompatible with the interest, harmony, comfort, and welfare of other students. I understand that while participating in the program, I am still bound by obligation to the current CCAD Student Code of Conduct, and thereby subject to any campus judicial action taken for violations of this code. If my participation is terminated, I consent to being sent home at my own (or my parents') expense with no refunds and I covenant that I will willingly comply with whatever travel arrangements are made by the college or its agents in such circumstances.

I understand that from time to time the college's publicity material may include statements by its students and/or their photographs, and I consent to such use of my comments and photographic likeness. I further agree to the release of my name and address to other students interested in off-campus experiences.

All references in this Consent and Release Agreement to "the college" and "its agents" shall include the college and all of its officers, directors, staff members, campus directors, chaperones, group leaders, teachers, employees, agents, and affiliated companies. All references herein to "parents" shall include any legal guardian or other adult responsible for the student.

This Consent and Release Agreement shall be effective with the date below and shall be governed by the laws of the State of Ohio. I expressly agree that this Consent and Release Agreement is intended to be as broad and inclusive as permitted by the law of the State of Ohio and that if any portion of this agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I understand that my agreement with the college cannot be modified or interpreted except in writing by the college and that no oral modification or interpretation shall have any validity.

I have carefully read this agreement and know the contents, and I sign this release as my own free act.

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent signature  
(Required if student is under age 18)

\_\_\_\_\_  
Date