

**FACULTY-LED STUDY ABROAD PROGRAM
FAMILY & FRIEND RELEASE AND ASSUMPTION OF RISK**

I, _____ the undersigned, hold harmless and release from any and all claims, demands, or causes of action against the State of Florida, Florida Atlantic University Board of Trustees, Florida Atlantic University and their respective agents, officers and employees (referred to in this Release collectively as "FAU") for an _____

_____ taxi service, school, university, or any other person, firm, agency (government or private), company or individual in connection with the _____ Faculty-led Study Abroad Program. I also hold harmless, release, and agree to indemnify FAU with regard to any financial obligations or liabilities of any kind that I may incur personally or any damage resulting from or in connection with my travel with said Program.

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