

SAN GEMINI PRESERVATION STUDIES 2015 – PROGRAM LIABILITY RELEASE FORM

I do hereby agree to hold harmless and indemnify the San Gemini Preservation Studies Program, the International Institute for Restoration and Preservation Studies and Valdosta State University, their officers, agents and employees, from any and all liability, loss damages, costs or expenses which are sustained or incurred by me, and which may include damage to my personal property, personal injury or death, arising out of my actions in the course of:

Participating in the San Gemini Preservation Study Abroad Program, taking place from June 1 to August 8, 2015. The restoration field work, workshops, and field visits that may include the following activities: climbing of scaffolding and ladders and working with tools and toxic chemicals on the restoration on historic buildings, on archaeological excavations, survey of old structures in historic buildings, ceramics and paper restoration workshops. In addition, the program may include visits to construction sites in restoration projects, travel to neighboring cities and sites for research purposes with or without faculty or staff supervision. The Program assumes that each student is a responsible adult who will be capable of the independent travel that may be required.

I understand that if I participate in this activity there may be inherent risks, dangerous conditions, or harmful consequences that exceed the risk normally found in a classroom environment. These include, but are not limited to: accidental cuts, abrasions, broken bones, or more serious consequences including permanent injury or death, working around and on buildings that are not in the best repair, in archaeological sites and visiting construction sites.

I accept full responsibility for my health and wellbeing by participating in this activity, and I understand that I am giving up specific legal rights by signing this document.

I agree to carry medical and accident insurance that will cover all medical expenses I may incur during my participation in the program, as well as after the program (if related to my activities related to the San Gemini Preservations Studies Program) that are not covered by the required travel CISI insurance.

I understand that the required insurance covers medical costs and repatriation costs incurred in Italy due to accidents or disease. It does not cover pre-existing conditions. It also does not cover medical costs that you may incur after your return to your home country. I agree to read carefully the insurance terms provided by the CISI policy and make sure to be covered for any supplemental policy that may be necessary.

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Signature            Date

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Print your name legibly

*Please return this form to Max Cardillo on the first day of class.*