NYU GLOBAL TRAVEL RELEASE

Foreign Travel Release Form for students 18 Years or older

Name	University	University ID Number		
NYU Site or Other Location Abroad	Semester	/Year		
Wagner Course Name or Capstone/Internship Org	ganization Name			
Program: NYU Wagner Courses Abroad/Internation	onal Capstone/S	ummer Internsh	ips	
In consideration for being permitted to participat which Program will or may involve travel in, from abroad, including, without being limited to, agree:	, and to the Unite	ed States, and i	n, to, and from places	
(a) to release and discharge New York University for any injury (including death), and for any dama suffer as a result of or in connection with my part Program, including, without being limited to, any or occurring in connection with the negligent acts employees or agents of the University; and	age to or loss of pricipation in the Findings, or configury, loss, or configuration in the loss of	oroperty, howev Program or any t lamage resultin	ver caused, that I cravel related to the g from, arising out of,	
(b) not to raise any claim or institute any legal accause of action that may result from or arise out of Program or any travel related to the Program, incl that may result from or arise out of or in connection of the faculty or other employees or agents of the	of or in connection luding, without b on with the negl	on with my parti eing limited to,	cipation in the any cause of action	
All references to the University in this form shall the benefit of, the University's trustees, officers,				
I will inform an appropriate representative of the health, or physical or mental condition, that may travel related to the Program.				
This release shall be governed by and construed applicable to contracts entered into and intended I shall submit to the jurisdiction of the federal and State, for the resolution of disputes arising herecexecution hereof.	d to be performe d state courts lo	d solely within t cated in New Yo	the State of New York. ork County, New York	
Name	Date of Bi	Date of Birth		
Address	City	State	Zip Code	
Signature	Date			