



ASSOCIATION OF UNIVERSITIES FOR RESEARCH IN ASTRONOMY, INC.

**ASSUMPTION OF RISK AND RELEASE**

Name: \_\_\_\_\_

Last

First

Middle Name/Initial

Cities and Countries to be Visited and Expected Dates of Travel for Each Destination:

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By signing this document, I agree to the following:

**Risk of Travel:**

I have carefully read and understand the applicable Travel Warnings, posted at: <http://travel.state.gov/>

I understand that these travel warnings represent the U.S. government's determination that there is a heightened level of risk associated with traveling to the stated country or region; it may be necessary to cancel the travel if the security situation deteriorates further between now and the departure date; it may be necessary to leave the country early and quickly if the security situation deteriorates; I have been advised to register with the US State Department's Smart Traveler Enrollment Program (STEP), <https://step.state.gov/step/>, prior to departure; I understand that the US government may not be able to provide me with any legal, medical or emergency assistance while I am in the Countries listed above; and I understand that international travel poses risks, including: foreign political, legal, social, and economic conditions; different standards of design, safety, and maintenance of buildings, public places, and conveyances; and local medical and weather conditions. I understand that I am encouraged to familiarize myself with information about the country and/or region I am going to, including the most current travel warnings and consular information sheets issued by the U.S. Department of State <http://travel.state.gov> and the most current health warnings issued by the U.S. Centers for Disease Control and Prevention <http://wwwnc.cdc.gov/travel/notices> which may contain information about the inherent dangers and difficulties specific to the country or region of my destination.

U.S. State Department Warning Status: I understand that one or more of the countries that I plan to visit may have a travel warning issued by the U.S. State Department. I understand that travel warnings may change to more urgent status with little or no notice. I understand and agree that by signing this document, I certify that I have read and understand the AURA's policy for International Travel Safety and Compliance.



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**Independent Activity:**

I understand that AURA does not represent or act as an agent for, and cannot control the acts or omissions of, any host institution, host family, transportation carrier, hotel, tour organizer or other provider of goods or services not directly provided by AURA. AURA is not responsible for matters that are beyond its control, and I hereby release AURA from any injury, loss, damage, accident, delay or expense arising out of any such matters.

I understand that, in addition to the other provisions of this agreement, AURA is not responsible for any injury or loss I may suffer when I am traveling independently or am otherwise separated or absent from any work related activities.

**Health and Safety:**

I am aware of all applicable personal medical needs. I have arranged, through insurance or otherwise, to meet any and all needs for medical necessities while I travel abroad. I recognize that AURA is not obligated to attend to any of my medical or medication needs, and I assume all risk and responsibility for those needs.

**Export Compliance:**

It is AURA policy that all employees comply with the United States export policies and regulations. Under no circumstances will exports be made contrary to U.S. export regulations by any individual operating on behalf of AURA. Employees outside the United States may not re-export any commodity, technology, or software unless appropriate authorization has been obtained, including foreign-produced items that are the direct product of U.S. technology and software and are subject to national security controls under the Export Administration Act. No activities will be undertaken that are in violation of the United States policies which seek to control nuclear proliferation, missile technology, and chemical and biological weapons.

Failure to comply with these regulations may result in the imposition of criminal and/or civil fines and penalties, including jail time and monetary penalties, and employees will be subject to disciplinary action and/or termination.

**Standards of Conduct:**

I understand that each foreign country has its own laws and standards of acceptable conduct, including dress, manners, morals, politics, drug use, and behavior. I recognize that behavior that violates those



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laws or standards could harm the AURA's relations with those countries and the institutions therein, as well as my own health and safety. I also understand that AURA is not responsible for providing any assistance, legal or otherwise, in dealing with the laws or standards of foreign countries. I will become informed of, and abide by, all such laws and standards for each country to or through which I will travel, and accept any consequences of violations thereof.

**Assumption of Risk and Release of Claims:**

Knowing the risks described above, to the maximum extent permitted by law, I release and indemnify AURA and its officers, employees, and agents, from and against any present or future claim, loss, or liability for injury to person or property which I may suffer, or for which I may be liable to any other person, during my participation in this travel activity (including periods in transit).

I have carefully read this Assumption of Risk and Release before signing it. No representations, statements, or inducements, oral or written, apart from the foregoing written statement, have been made.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_