



Sister Parish, Inc. / Iglesias Hermanas
Agreement and Release of Liability
Form for Delegates

www.sisterparish.org

1. I, _____ ("Participant") have applied and intend to participate in a Sister Parish delegation travel program or other travel program coordinated or conducted by Sister Parish, Inc. (SP).

2. I understand and am aware that during the program in which I will participate certain risks and dangers may arise, including but not limited to, the hazards of traveling in unsafe areas or under unsafe conditions, the hazards of traveling in politically unstable areas, the dangers of civil disturbances and war, the forces of nature, the negligent or reckless acts or omissions or strict liability of Sister Parish, Inc., its agents, employees, officers, directors, associates, affiliated companies or subcontractors, travel boat, automobile, train, ship, aircraft, bus, or other means of conveyance, and accident or illness in places without access to medical facilities, transportation, or means of rapid evacuation and assistance.

3. I am aware that participation in the program and/or the use of transportation, housing and dining services, and other goods and services in connection with participation in the program carries a risk of personal injury, serious illness, death and property damage or loss. I expressly and voluntarily assume all risk of injury, illness, death and property damage or loss that may result from participation in the program and use of the goods and services described above.

4. Sister Parish, Inc. agrees to carry out the program as specified. As consideration for being permitted to participate in the program, I hereby RELEASE AND DISCHARGE Sister Parish, Inc., and their officers, directors, faculty, agents, employees and legal representatives ("the Released Parties) from liability for injury, illness, death, damage or loss arising out of the arrangement or provision of transportation, housing, dining or other goods and services, or arising out of any other activity incident to my participation in the program, including any losses CAUSED BY THE NEGLIGENCE OR STRICT LIABILITY of the Released Parties. I do not release Sister Parish, Inc. from liability for willful or intentional acts or punitive damages.

5. I also AGREE NOT TO SUE OR MAKE A CLAIM AGAINST THE RELEASED PARTIES for injury, illness, death, damage or loss sustained as a result of participation in the program and use of the goods and services described above. I will indemnify and hold harmless the released parties from all claims, judgments, and costs, including attorneys' fees, incurred in connection with any action. I also agree to reimburse Sister Parish, Inc. for any sums SP may advance for the purchase of goods or services on my behalf in connection with my participation in the program.

6. I further agree to abide by all applicable rules and regulations of Sister Parish, Inc. and its staff, representatives or designees, all instructions of SP, representatives or designees while participating in the program and the laws of the governmental jurisdictions at the place or places of program offering. I understand that noncompliance may result in expulsion from the program and forfeiture of program fees. I agree that if I violate any applicable rule, regulation, instruction or law at any time during the program I may be sent home immediately at my own expense. I agree to reimburse Sister Parish, Inc. for any and all costs associated with sending me home.

Signed By: _____
Printed Name: _____
Date: _____

Please scan and email this form to your delegation coordinator at least 3 weeks prior to travel:

Email: usoffice@sisterparish.org
U.S. Office
PO Box 5202
Fargo, ND 58105