

# The School for Field Studies

NAME

SFS COURSE/YEAR

For Official Use Only

## TERMS AND REGULATIONS CONTRACT

The success of the program in which you (or your son/daughter/ward) are participating depends to a large extent on proper communication among all parties involved. It is important that you understand the nature of The School for Field Studies (SFS) programs and that we inform you of potential issues that may arise in the future.

Therefore, please read this document and The SFS Program Manual thoroughly, before signing this agreement.

**1. USE OF PHOTOGRAPHS OR WRITTEN REPORTS:** The participant or parent/guardian authorizes and agrees to the reasonable use by the School of any photographs which may be taken of any aspect of this program and which may include the image of the participant as well as any written comments or reports submitted to the School by the participant.

**2. CHANGES IN SCHEDULE, ITINERARY:** In the event that it becomes advisable or necessary - for the convenience or safety of the group, in the best interests of the program, or for any reason whatsoever - to alter the itinerary, accommodations or other services or programs contained in the description of the course, the School is hereby authorized to make such changes.

**3. INSURANCE, IMMUNIZATIONS AND MEDICAL HISTORIES:** It is the participant's responsibility to have insurance in force that will cover expenses for medical treatment, theft, and loss or damage to personal possessions in the country in which the program is conducted; to have taken all required prophylactic treatments; and to have furnished complete and accurate medical histories as stated in the SFS CONFIDENTIAL MEDICAL HISTORY FORM. I have been advised that inaccurate or incomplete medical information may result in restriction from certain activities and may affect the quality of the participant's experience and academic credit, and may lead to expulsion from the program.

**4. EMERGENCY MEDICAL TREATMENT:** In the event of an emergency, SFS will take reasonable steps to help the participant receive proper medical care. However, SFS makes no claims and accepts no responsibility regarding the quality and availability of appropriate medical care. Further, the cost of such services - including medicines, hospital treatment, and certain travel expenses for the participant and accompanying staff - will be charged to and paid for by the participant or parent/guardian. SFS provides all students with Evacuation and Repatriation Insurance. SFS must be reimbursed for any medical and related expenses within 10 days of program completion. No grades will be released for a student with outstanding financial obligations to SFS.

**5. NON-PROGRAM TIME:** SFS participants are occasionally given unscheduled time to use as they see fit. Any independent travel or activities in which the participant chooses to become involved outside of the program (including weekends, evenings, holidays, mid-term break, and time before or after the program period) will be at the expense and risk of the participant. SFS has no involvement in selecting the staff, route, schedule, transportation, facilities, or equipment for activities that take place during non-program time; participants should consider these factors carefully before deciding to become involved in any travel or activity outside of the program. SFS staff members may from time-to-time provide participants with information regarding certain destinations or activities. In no way does this assistance represent an SFS endorsement of those destinations or activities. SFS staff members who participate in or organize activities during non-program time do so as private individuals, not as representatives of SFS. SFS is not responsible for the action or inaction of SFS staff members acting as private individuals. The participant (and/or their

parents/guardians) understands that SFS is not responsible for the participant while the participant is traveling independently, and that SFS is not responsible for the safety or security of participants outside the program.

**6. CONDUCT:** The participant and the parents/guardian understand that SFS necessarily requires students to manage their behavior in such a way that takes into account the following Operational Objectives: safety, academic needs, local community relations, center security, legality, liability, ability of center to conduct business, ability of headquarters to conduct business. Participants must comply with the requests and instructions of the SFS staff involving safety precautions. SFS reserves the right to reject applicants and, at our discretion, to expel from any program any participant who is unwilling to engage fully in or adjust to the rigors of the program; who endangers him/herself or any member of the group; who does not respect the local custom or culture of the host community; or whose attitude or conduct is in violation of the law or SFS policy and/or is otherwise detrimental to the group or the good name of SFS. **SFS reserves the option to contact parents/guardians should a student require disciplinary action. If a participant leaves the group, voluntarily or at the request of an authorized SFS employee, a reasonable effort will be made to contact the participant's parent/guardian/emergency contact.** In such a case, SFS will arrange for the participant to be returned to the point of departure at the participant's expense. An extra charge of up to \$200 may be levied to help defray SFS's costs in out-processing and transporting the student back to the point of departure. Once the student is returned to the point of departure, all responsibility on the part of The School for Field Studies will cease. Early departure from a program will result in loss of academic credit and fees paid to SFS. All outstanding financial obligations to SFS will remain in full force and effect. In the event a student leaves a semester program prior to program completion, SFS will inform the participant's home school of the student's withdrawal.

**7. EMERGENCY CONTACT NOTIFICATION:** SFS will attempt to notify those persons identified by the student as their Emergency Contact in the event of any event that we deem to be of an emergency nature, to include, but not limited to, any time a student is incapacitated and cannot notify emergency contact on their own.

**I certify that I have read the SFS Program Manual, including policies on cancellations and refunds, and agree to the above conditions. I have obtained appropriate medical insurance as described in #3 above. I understand that SFS does not carry insurance on my personal possessions and will not bear any responsibility for them.**

**X** \_\_\_\_\_  
STUDENT SIGNATURE DATE

**X** \_\_\_\_\_  
PARENT OR GUARDIAN (IF STUDENT IF UNDER 18) DATE

\_\_\_\_\_  
PRINTED NAME OF STUDENT (AND PARENT OR GUARDIAN IF STUDENT UNDER 18) RELATIONSHIP

