



**A.S.I. ALTERNATIVE BREAK RELEASE AND ASSUMPTION OF RISK**  
**Cuba / Travel Health Precaution**  
**Travel Dates: 5/25/2017 - 6/2/2017**

I, the undersigned, will be participating in the Experience Cuba – A.S.I. Alternative Break service learning trip to Cuba (inclusive of Havana, Cienfuegos, Trinidad, and Santa Clara) with the departure date of May 25, 2017 and the return date of June 2, 2017.

Whereas, my participation in A.S.I. Alternative Break (the “Activity”) is voluntary, I am aware of and have had an opportunity to carefully read the current CDC Outbreak Notice/Travel Health Precaution regarding travel to Cuba and I understand that said notice specifically contains travel warnings and guidelines (<http://wwwnc.cdc.gov/travel/destinations/traveler/none/cuba>).

Now therefore, in consideration of my being afforded the opportunity to participate in this Activity, I agree as follows:

1. I voluntarily and willingly choose to participate in this Activity. I have objectives that I believe justify the risks associated with the Activity. I further agree to voluntarily assume all risks including for accident, injury or damage to my health, person or property. I also agree to comply with the Center for Disease Control and Prevention guidelines for travel to Cuba, as well as any notices issued by the U.S. Department of State, <http://www.state.gov/travel>.
2. I acknowledge that personal and/or bodily injury including illness, death and property loss or damage, including that resulting from kidnapping, criminal activity, terrorist attacks, lack of access to health care, and food or beverage contamination, are possible risks of international travel. I am also aware of the Zika Virus as reported by the CDC <http://wwwnc.cdc.gov/travel/notices>. International air travel may also involve travel rerouting, interruption and delays, increased security checks and additional air passenger restrictions. I have considered all of these risks, made my own inquiry and investigation, and voluntarily agree to assume them.
3. I, on behalf of myself, my heirs, successors and assigns, hereby agree to indemnify, defend and hold harmless the Associated Students, Incorporated, its officers, agents, employees, volunteers, the State of California, the Trustees of California State University, the California State University, Los Angeles, and their respective agents, officers, employers and insurers, and each of them, from and against all claims, liability, rights, causes of action, costs, attorney’s fees and expenses of any nature whatsoever, whether known or unknown, for any injury, loss, damage, accident, delay or expense, including those resulting from the use of any vehicle, disease, weather, sickness, or arising from any act or omission of any restaurant, transportation or accommodation provider, resulting from or in any way connected with my participation in the Activity. I agree and understand that if for any reason I am unable to participate in the Activity that the Associated Students, Incorporated and the University is not responsible to me for any amounts I have expended in connection with the Activity.
4. I understand that this agreement and any claims arising from my participation in the Activity shall be construed according to the laws of the State of California, which shall be the exclusive forum for any



lawsuits or actions brought pursuant or incident to this agreement. If any part of this agreement is held to be invalid or unenforceable, the remainder of the agreement shall remain in full force and effect.

**I am at least 18 years old and have carefully read this document with the opportunity to consult an attorney before signing it. I understand that it is a legal contract and a release of legal rights. I understand it and agree to be bound by it.**

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**Signature of Participant** **Date**

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**Executive Director** **Date**  
**Associated Students, Incorporated**