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MCGILL BARBADOS FIELD STUDY SEMESTER
STUDENT ACCEPTANCE FORM

The McGill Barbados Field Study Semester is to provide a semester of practical field experience, being desirous of gaining practical experience in this area of studies, and in consideration of the training that I will receive because of the McGill Barbados Field Study Semester being offered, I hereby agree to the terms and conditions below:

1. I understand that participation in the McGill Barbados Field Study Semester involves many risks, dangers, and hazards, including but not limited to those outlined in Global Affairs Canada Travel Reports for Barbados. I have reviewed the current issue of these reports and understand the risks outlined therein.
2. I have registered my travel with the McGill Barbados Field Study Semester to the registration service of Global Affairs Canada or with a similar agency in my home country as well as with the McGill Travel Registry.
3. I understand that no courses offered during the McGill Barbados Field Study Semester are essential to any McGill program and that no student is required to go to Barbados to complete a McGill degree.
4. I will undertake such functions and responsibilities consistent with the training program approved by McGill and which McGill may specify from time to time and will promptly and fully comply with the directions received from McGill Faculty members and staff during the field semester.
5. I understand that as a student of McGill I remain subject to the rules, regulations, and policies of McGill, including but not limited to, those contained in the Handbook of Student Rights and Responsibilities.
6. I will undergo a medical examination with a physician of my choice and will receive appropriate immunization prior to the start of the McGill Barbados Field Study Semester and will provide McGill with an attestation to this effect.
7. I will carry sufficient accident and health insurance (that includes medical evacuation) during my stay in Barbados.
8. I will travel to Barbados with a valid passport, visa, immunization booklet, and return air ticket.
9. I will be responsible for all expenses with respect to McGill Barbados Field Study Semester fees, and I hereby declare and undertake that I am financially capable of meeting such expenses incurred on my behalf.
10. I will not cause McGill to incur any expense, including but not limited to telephone, telecommunications, and transportation, and will promptly and fully reimburse McGill for any expenses.

I will familiarize myself with and observe the local laws and customs and will at all times behave responsibly and within the laws of Barbados, and the policies and procedures of the McGill Barbados Field Study Semester and will do nothing to bring discredit to McGill University.

I will not engage in any occupation or trade, whether paid or unpaid, while in Barbados.

I confirm that I have attended the orientation given by McGill and understand that the McGill Barbados Field Study Semester involves at times physically and mentally strenuous activities.

I confirm that I will behave in such a way as to minimize risk to myself and other participants at all times.

I hold McGill, including McGill directors, officers, employees or contractors harmless from any claims, demands or actions of any kind, and shall indemnify McGill, including McGill directors, officers, employees or contractors from any loss or expenses incurred, and accept full responsibility for my participation in the McGill Barbados Field Study Semester.

I understand McGill may terminate my participation in the McGill Barbados Field Study Semester and require me to return to Canada forthwith for any reason.

I understand that at the conclusion of the McGill Barbados Field Study Semester, or at the termination of my participation in the McGill Barbados Field Study Semester earlier than the conclusion of the McGill Barbados Field Study Semester, McGill's responsibility for my safety, health and security will cease immediately and my activities will be solely at my own risk and expense.

I authorize McGill to contact the person I have named as a contact in case of emergency at their discretion.

I authorize McGill to release such personal information about me as is required by government bodies or McGill's partners for the purpose of identifying me and registering me as a participant in the program.

I agree that this agreement shall be construed, governed and interpreted by the laws of the Province of Quebec, Canada, and agree to the exclusive jurisdiction of the Courts of the Province of Quebec.

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Signed this ' D W H

Name(Print)

Signature