

**DOMESTICE TRAVEL  
STUDENT / FACULTY / STAFF WAIVER AND RELEASE OF LIABILITY  
Creighton University**

I, \_\_\_\_\_ ( \_\_\_\_\_ ),  
(full legal name) (CU NetID)

at my request, have chosen to travel within the United States to participate in **EVENT** during the following dates: **(date)**. I have been informed of, understand and acknowledge that the U.S. Centers for Disease Control (CDC) has issued guidance for domestic travel During COVID-19 (see <https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-during-covid19.html>) and that various localities have restrictions in place, including testing requirements, stay-at-home orders, and quarantine upon arrival that may change with little notice (see <https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-planner/index.html>).

I further acknowledge and understand:

- Creighton neither requires nor expects me to travel to **City / State** to participate in the **EVENT**;
- My decision to travel to **City / State** is my own voluntary decision, taken without coercion or undue influence;
- My travel arrangements may include required isolation/quarantine or testing upon arrival in or before departure from **City / State**:
  - I agree to follow the local / national or host organization requirements for quarantine in the event I test positive while in **City / State**;
  - In the event I am required to be in quarantine at the time I am scheduled to return to my home state I agree to remain in quarantine for at least 2 weeks or until medically cleared by a local attending physician even if those two weeks extend past my planned return to my home state;
  - I understand I may be responsible for my COVID-19 testing, quarantine housing, meals and medical care costs. I further understand that a quarantine-based extension of my travel plans may result in other increased travel costs to me.
- I must comply with any applicable federal, state, or local quarantine requirements upon return to my home state and my travel schedule should appropriately manage for such requirements; and
- Some travelers have faced delays in returning to their home state during this pandemic, and such delays cannot be ruled out in the future.
- I am strongly encouraged to obtain a Covid-19 vaccine prior to my travel.

I hereby assume all risk of injury or death resulting from my participation in this education-related travel, and that I fully understand the dangers and hazards of such activity.

I do hereby agree to waive any claims for personal injury or property damage against Creighton University and against any and all agents or employees of Creighton University, and by my signature below do release and forever discharge Creighton University and its past and present trustees, officials, officers, agents, employees and representatives (including volunteers), and their heirs, executors, administrators, successors and assigns, from each and every right and claim that I may hereafter have on account of damages or personal injury resulting from any incident, occurrence or activity arising from my travel to, in and from **Country(ies) XYZ** and my continuing participation in **EVENT**.

I hereby declare that the terms of this release are contractual and not a mere recital. This release shall bind me as the signor, my heirs, next of kin, executors, administrators, successors, or assigns and shall inure to the benefit of the parties released, their heirs, next of kin, executors, administrators, successors or assigns. The release granted herein shall commence and be in full force and effect after the date set forth below.

I agree that should any provision or aspect of this release be found to be unenforceable, all remaining provisions of the release will remain in full force and effect.

I represent that my agreement to the provisions herein is wholly voluntary, and further understand that prior to signing this release, I have the right to consult with an adviser, counselor or attorney of my choice.

I agree that, should there be any dispute concerning my participation in this travel and my remaining in **City / State** that would require the adjudication of a court of law, venue will lie only in the state and federal courts of the State of Nebraska, and the cause of action will be determined by the laws of the State of Nebraska.

This release represents my complete understanding regarding the release of Creighton University from responsibility and liability for my participation in this travel, supersedes any previous or contemporaneous understandings I may have had with Creighton University on this subject, whether written or oral, and cannot be changed or amended in any way without my written concurrence.

THE UNDERSIGNED HAS READ THE FOREGOING RELEASE AND FULLY UNDERSTANDS AND AGREES WITH ITS TERMS AND CONDITIONS.

IN WITNESS WHEREOF, the undersigned has hereunto set his/her hand this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
(Traveler Signature)

\_\_\_\_\_  
(Printed Name)

**NOTARY**

State of: \_\_\_\_\_ County of \_\_\_\_\_. Subscribed and sworn to before me, a Notary

Public within and for the County and State above set out this \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
Notary

\_\_\_\_\_  
My appointment expires

**Return a scanned of the completed form to René Padilla, PhD, Vice Provost for Global Engagement at [RenePadilla@creighton.edu](mailto:RenePadilla@creighton.edu) AND mail the original completed form to: Global Engagement Office (GEO), Creighton University 2500 California Plaza, Creighton Hall 324 Omaha, NE 68178.**