



## ALTERNATIVE TRANSPORTATION LIABILITY WAIVER

*Note: This form is used when a Global Brigades Chapter or individual has made travel arrangements on their own and without assistance from their Global Brigades Program Advisor*

It is the understanding of Global Brigades and the (NAME OF SCHOOL/ORGANIZATION) that you have elected to make alternative transportation arrangements and will not participate in booking travel arrangements through Brigades Travel as part of the off-campus trip entitled "Global Brigades" on \_\_\_\_\_(date).

It is, therefore, understood that you accept full responsibility for travel arrangements and the associated costs. Further, the (NAME OF SCHOOL/ORGANIZATION) and Global Brigades are not responsible for any bodily injury or property damage which may arise out of these alternative arrangements. Note also that the Global Brigades Travel Insurance policy will only cover participants for the Brigade dates – coverage does not extend or begin early for alternative travel arrangements. Please affirm your understanding by reading and signing the statement below:

**I understand that transportation arrangements to and from are available to me and I have elected to decline these arrangements. I accept full responsibility for making my own arrangements. I understand that the Global Brigades Travel Insurance policy will not cover me outside of the trip dates above. I will defend, indemnify, and hold the (NAME OF SCHOOL/ORGANIZATION), Global Brigades, its trustees, agents or employees harmless from any bodily injury, property damage, or other incident which may arise out of my alternative travel arrangements or any personal time or activities that occur outside of the authorized activities scheduled as part of this (NAME OF SCHOOL/ORGANIZATION) Global Brigades off-campus trip.**

**I will take responsibility for meeting the volunteers in my chapter at the airport at the time/day of arrival, and understand that no special airport pick-up arrangements will be made to accommodate my alternative travel schedule.**

Name (please print) \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_  
(If participant is under 18 years of age)

*"Global Brigades" refers to one or more of the following affiliates of "Global Brigades Association," a Washington-based not-for-profit organization, each of which is a separate and independent legal entity: "Global Brigades USA," "Global Brigades Switzerland," "Global Brigades Germany," "Global Brigades Ireland," "Global Brigades UK," "Asociacion Global Brigades de Honduras," "Fundacion Brigades Globales de Panama," and "Global Brigades Ghana."*