

## PARTICIPANT WAIVER

READ CAREFULLY — SIGNING THIS DOCUMENT AFFECTS LEGAL RIGHTS —RELEASE FROM LIABILITY

As additional consideration for the services provided by Scholastica Travel Inc per the Trip Agreement, I recognize and acknowledge that the novel Coronavirus / COVID-19 virus pandemic continues. I further recognize and acknowledge that the services provided by Scholastica Travel Inc per the Trip Agreement may be interrupted or cancelled by the entity or entities chosen by Scholastica Travel Inc to provide services, by a governmental entity, or by an entity over which Scholastica Travel Inc has no control. Therefore, I agree to be bound by Scholastica Travel Inc's cancellation policy as set forth below:

Calendar Days Before Scheduled Departure Date	Cancellation Policy
<b>30 or more</b>	Scholastica Travel Inc will retain 20% of the trip deposit due at the time of cancellation. Each individual or group will receive an 80% refund of money due to Scholastica at the time of cancellation less any non-refundable prepaid reservations.
<b>14 to 29</b>	Scholastica Travel Inc will retain 25% of the total trip cost. Each individual or group will receive a 75% refund of money due to Scholastica at the time of cancellation less any non-refundable prepaid reservations, contingent on the group or individual being paid in full.
<b>13 or less</b>	Scholastica Travel Inc will retain 50% of the total trip cost. Each individual or group will receive a 50% refund of money due to Scholastica at the time of cancellation less any non-refundable prepaid reservations, contingent on the individual or group being paid in full.

I further acknowledge and agree that many physicians and healthcare officials and governmental officials have declared that the novel Coronavirus/COVID-19 virus is a dangerous disease that may result in injury, temporary or permanent disability, and/or death. Many physicians, healthcare officials, and governmental officials have stated that the novel Coronavirus/COVID-19 virus is highly contagious. I further acknowledge and agree that despite mitigation and preventative efforts that the total prevention of the spread of the novel Coronavirus/COVID-19 virus is not possible. Therefore, I knowingly and voluntarily accept the risk that I may contract the novel Coronavirus/COVID-19 virus as a result of participating in a trip provided by Scholastica Travel Inc I further acknowledge and understand that as a result of contracting the novel Coronavirus/COVID-19 virus, I may suffer personal injury, temporary or permanent disability, or death. I voluntarily agree to assume all of the forgoing and accept sole responsibility for any injury to myself, including personal injury, temporary or permanent disability, death, illness, damages, losses, claims, liabilities or expenses of any kind that I may incur, suffer, or experience as a result of participating in the trip provided by Scholastica Travel Inc I specifically acknowledge that if I contract the novel Coronavirus/ COVID-19 virus before or during the trip, that I may be prevented from completing the trip. I may be required to obtain medical care and may also be required to quarantine. Therefore, I acknowledge and agree that if I also contract the novel Coronavirus / COVID-19 virus, Scholastica Travel Inc shall not be responsible for any expense or loss including but not limited to medical expenses, alternate housing expenses, alternate transportation expenses, and/or food expenses.

Signature of Group Leader: \_\_\_\_\_

Print: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Tour Participant: \_\_\_\_\_

Signature of Tour Participant if 18 Years of Age or Older: \_\_\_\_\_

Print: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Parent(s)/Guardian(s) on Behalf of Child who is a Minor Child or Ward: \_\_\_\_\_

Print: \_\_\_\_\_

Date: \_\_\_\_\_