

CENTER FOR INTERNATIONAL LEGAL STUDIES

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This instrument requires notarization. Upon signature and notarization, return the original to the Center for International Legal Studies. Confirmation of appointment will not be made without receipt of this acknowledgement.

I certify that I will have travel, medical, and accident insurance for myself and any persons travelling with me which will be in effect during the entire period that I am abroad in connection with the Senior Lawyers Program. In the unlikely event that I or any accompanying persons become injured or ill during the course of the program, I understand that medical, hospital, and any related expenses will be paid when incurred and that I am responsible for such payments. In consideration of my participation in this program, I hereby release, disclaim, and exonerate the Center for International Legal Studies from any and all liability for any and all injuries, losses, damages, or other adverse consequences arising directly or indirectly from participation in said program, regardless of the source or nature of the cause thereof.

I recognize that it is my responsibility to negotiate directly, upon information provided by the Center for International Legal Studies, with my host institution as to the precise timing of my teaching assignment and the content of my course.

I acknowledge that I have been strongly advised by Center for International Legal Studies to register with the nearest United States or Canadian Consulate, as relevant, upon my arrival in the host country in order that such Consulate will be aware of my location and contact information.

I agree to inform the Center for International Legal Studies of any changes in my academic or professional standing or personal circumstances prior to the commencement of my appointment. I agree that all of my academic and professional information submitted in connection with my application may be made available to any host institutions considering my appointment in this program.

Signature

Dated

City, State / Province

State / Province of

This instrument was acknowledged before me on _____ (date)

By _____ (person)

Signature of Notary Public (Affix Seal)