

Friendship Force International Travel Insurance Waiver Form

Exchange:

Exchange Number:

Dates:

Exchange Director:

We, _____,
(Names of Ambassadors)

understand that Friendship Force International does not provide protection from trip interruption, cancellation or delay, loss of baggage, or emergency evacuation. We recognize that costs incurred as a result of the aforementioned circumstances or due to medical emergency may require immediate payment while traveling. We are prepared to cover these costs and hereby release our Hosts, the clubs, and Friendship Force International from all liability for the duration of this exchange.

Ambassador: _____

Ambassador: _____

Witnessed to and subscribed before me

at _____,
this _____ day of _____ 20_____.

Notary Public