



Declaration by the Parents or Legal Guardians of Underage Students (under 18)
Participating on Trips and Excursions

We hereby permit our child _____ to participate in the trip/excursion _____.

1. The planned time schedule and program are described in the enclosed documents. The participants are normally not under the supervision of the accompanying supervisor at all times. The program includes that the students will have free time available to them. During these times the students are unsupervised and free to explore the place of the trip/excursion without being accompanied by a supervisor; Number 3. applies. The increase in personal responsibility and self-discipline which may be required on the trip/excursion will not be over-challenging for our child.
2. The organiser of the trip/excursion is Jacobs University Bremen gGmbH. Supervision by an accompanying supervisor will only partly occur during the trip/excursion (see above Number 1). We transfer the right to determine the place of residence of our child to the Jacobs University Bremen gGmbH for the duration of the trip/excursion. We agree for this right to be further transferred as required to a responsible supervising adult. We are aware that the supervision of our child can only be carried out to a certain reasonable extent by the supervisors on trips/excursions.
3. As parent or legal guardian we give our consent for our child to carry out activities on their own, without a supervisor, either independently or as part of a group. All participants must report attendance and absence to the supervisor. The supervisor is relieved of any supervisory obligations for the duration of the student's absence from the group.
4. Sleeping times will be set by the supervisors; students will be held responsible for violation of these rules.
5. Please inform the Jacobs University Bremen gGmbH **Foundation Year Coordinator** of any health restrictions of your child and in particular of illnesses which require special treatment, or demand special care or attention or which could cause a risk for the other students accompanying them on the trip/excursion (eg. risk of infection). Please also report if your child has an iodine or penicillin allergy.

If our child regularly requires to take medicine or if they are dependent on any medicinal aids, the administration or use of these will be entirely the responsibility of the student.

6. We hereby give our consent for immunisation protection to be administered if this is considered necessary by a medical doctor and likewise for them to take any other necessary medical measures, including urgent necessary operations, if special circumstances do not allow for our explicit consent to be given in time.

Note: Please be aware that medical care in countries outside of Germany will usually be required to be paid in cash.

According to the Infection Protection Act (Infektionsschutzgesetz) of the German Federal Republic you are obliged to inform the Jacobs University Bremen gGmbH in writing if your child has, or is suspected of having, an infectious disease.

7. We give our child permission, under special circumstances (eg. to visit a doctor), to travel at their own risk in the supervisor's vehicle or in the vehicle of another authorised supervising person or in another private vehicle. Under such circumstances we will waive the right to compensation for any damages (against driver and car owner), if compensation cannot be claimed through an insurance company. If a third party is liable for damages, the claim for damages against them by the passenger will be limited according to the partial sum equivalent to the extent of the joint liability of that third party.
8. Conflict situations arising within the group or with supervisors will be dealt with during the trip. Our child will follow the instructions of the supervisor in charge. If violations repeatedly occur, the parents or legal guardians will be informed and further action will be discussed. Parents or legal guardians will leave their contact details including email and telephone (if available) with Jacobs University Bremen gGmbH **Foundation Year Coordinator** so they can be reached at any time – including in cases of emergency, and they will also immediately inform the university of any changes. The decision to end the trip/excursion is at the discretion of the supervisors and the Jacobs University Bremen gGmbH. We are aware that Jacobs University Bremen gGmbH is excluded from any liability for culpable behaviour of our child. We give permission for the trip/excursion to be ended for our child at our expense either for serious violations of the rules or for pedagogical reasons.
9. We give Jacobs University Bremen gGmbH permission to use or publicize photographs taken during the trip/excursion on their homepage and for any other own purposes of Jacobs University Bremen gGmbH. Jacobs University Bremen gGmbH is not permitted to pass this material on to any other third party unless this is to another authorised representative.
10. If any deviations to the above-mentioned points should occur and/or if there are important spe-

cial circumstances the supervisors should be informed about, please note these in the attached questionnaire (intake of medicine, special illness symptoms and instructions for the supervisors, exclusion from participation in leisure or sport opportunities, swimmer/non-swimmer). If a student has been excluded from an activity on the trip/excursion program, and no alternative supervision can be found for the child during this time, then the child may not be able to take part in the trip/excursion.

11. Data Protection

We understand that Jacobs University Bremen gGmbH will treat the data as confidential which has been confided as part of this declaration and in compliance with pertaining regulations and that the evaluation, processing and use of this data will only take place, in compliance with current applicable German Law, for the purposes of executing this agreement and/or agreements between Jacobs University Bremen gGmbH and the student. We consent to the aforementioned evaluation, processing and use of this data.

With your signature you are confirming that you accept the rules, regulations and guidelines as described in this declaration, that you are aware of the related planned time schedule and the associated program planning and that you have read and completed fully and accurately the attached questionnaire. All consequences, with regard to the intentional withholding of true and relevant information will be entirely at your own expense. Consequences would be, for example, expulsion from the trip/excursion for health or psychological or behavioural problems and the consequential early cessation of the trip/excursion by Jacobs University Bremen gGmbH.

I agree to the above and to the details as stipulated on the documents attached.

Signature of parents/legal guardians / date

Signature of underage student / date

Attachments:

- Trip/excursion planned timetable with program planning
- Questionnaire