

CIJE/GO-INSPIRE ISRAEL TRIP PARTICIPANT WAIVER

GOINSPIRE (GI), "The Center for Initiatives in Jewish Education" (CIJE), and The Gruss Life Monument Funds shall not be liable or responsible for any loss or damage which you may sustain to your person or property, or for any loss or damage by reason of any delay, modification, curtailment or arrangement pertaining to the services or facilities to be provided by GI in connection with your participation on the Tour.

You have consulted a physician of your own choice and have been advised by said physician that you are in good health, do not suffer from any physical or mental ailment or disability which requires any medical or surgical care or treatment, or which would make your travel and/or participation on the Tour hazardous, unwise, unwarranted or a potential source of danger to you or to others who may travel with or participate on the Tour.

You acknowledge that Tour activities, including, but not limited to, hiking, rafting, snorkeling, swimming, camping, bus, jeep and air travel, may be subject to certain hazards; and further that you are voluntarily participating in the Tour and these activities, and understand the dangers and risks involved. You are aware that in the past there have been terrorist attacks, which must be regarded as an additional risk of travel in Israel. You hereby agree to accept any and all risks associated with participating in the Tour.

In case of medical or surgical emergency, you hereby give permission to the physician selected by GI to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery for you.

Please be aware that the medical insurance secured by GI for you in Israel does not cover pre-existing conditions.

You acknowledge that GoInspire, CIJE, and the Gruss Life Monument Funds are not responsible for securing your personal property during the program or in transit, and is not liable for any loss incurred by theft.

By submitting your online application, you thereby acknowledge that you have read and understand this waiver and permission agreement and agree to be bound by its terms and conditions.

Participant name _____

Participant signature _____

Date _____

Parent/Guardian name _____

Parent/Guardian signature _____

Date _____

Please sign this form and send it in via one of the following:

Email: info@goinspire.com | Mail: GoInspire, 28 Park Avenue, Airmont, NY 10952 |

Fax: 646-395-1416