

**NSHSS Agreement to Tour Code of Conduct  
and Release of Liability and Indemnity**

**Expected Behavior of All Attendees**

**As a condition of participating in the Nobel Week Tour (Activity) sponsored by the National Society of High School Scholars (NSHSS), I agree to:**

- Treat all attendees with respect and consideration, valuing a diversity of views and opinions.
- Be considerate, respectful, and collegial.
- Avoid personal attacks directed toward other attendees.
- Be mindful of my surroundings and of other event attendees.
- Be mindful of the event agenda, start time, transportation schedule, and curfew status.
- Refrain from bringing individuals not associated with our tour into my hotel room and will not invite non-assigned roommates into my hotel room.
- Represent myself in a professional manner and will not engage in any illegal or unprofessional behavior (I.e., underage drinking or use of substances).
- Lead by example by engaging in positive, kind, and inclusive behaviors by upholding the standards of NSHSS.

I understand that if I do not adhere to the above Code of Conduct, I (or the minor Participant) will be removed from the tour immediately, my parents will be notified of my behavior, and I will be sent home at my own expense.

**Release of Liability and Indemnity**

Additionally, I hereby forever release, discharge the NSHSS and its affiliated corporations and subsidiaries, directors, officers, employees, partners, managers, members, agents and/or assigns (collectively, NSHSS Indemnities) and agree to save, hold harmless, indemnify and defend the NSHSS Indemnities from any and all liability, claims, demands, causes of action, and possible causes of action including attorney's fees and related costs whatsoever arising out of or related to any loss, damage, or injury (including death) that I may sustain to my person or property FROM ANY CAUSE WHATSOEVER including negligence of the NSHSS Indemnities from the date of this Agreement through the conclusion of the Activity. I further acknowledge that the NSHSS Indemnities are not responsible for the errors, omissions, acts, or failures to act of any third party conducting the Activity. This release and discharge is binding on me (including minor Participant), my heirs, my next of kin, and my personal representatives.

By my initials placed in the space provided below, I:

\_\_\_\_\_ A. Represent that I am 18 years of age or older, that I have read this statement and agree to all the conditions stated. I am voluntarily participating in this Activity.

\_\_\_\_\_ B. Represent that I am the parent or legal guardian of the minor participant identified below and am qualified to enter into this Agreement and make the release, discharge, and

indemnity on behalf of the minor Participant. I acknowledge that the minor Participant is voluntarily participating in the Activity.

In the event I (or the minor Participant) should require medical care or treatment, I authorize the NSHSS, or its designated agent, to provide all emergency medical care deemed necessary to me (or the minor Participant) including but not limited to first aid, CPR, the use of AEDs, emergency medical transport, and sharing of medical information with medical personnel. I further agree to assume all costs involved for myself (or the minor Participant) and agree to be financially responsible for any costs incurred as a result of such treatment. I understand that NSHSS does not carry health or accident insurance that covers me (or the minor Participant).

This agreement is made in the State of Georgia, Dekalb County. All claims or causes of action shall be brought in the State or Federal courts of Dekalb County, Georgia without regard to conflict of law principles. This Agreement supersedes any and all previous oral or written promises or other agreements.

Review our NSHSS Tour Booking Agreement Here which is hereby incorporated by reference and is a part of this Agreement: [booking-conditions-nobel.pdf](http://nshss.org/booking-conditions-nobel.pdf) (nshss.org).

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Printed Participant Name

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Participant Signature

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Today's Date

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Participant Date of Birth

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Printed name of Parent or Guardian of Participant (if under 18)

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Signature of Parent or Guardian of Participant (if under 18)

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Phone number of Parent or Guardian to call in case of emergency