

## CIDP MADAGASCAR STUDY TOUR AGREEMENT - Community

Andrews University • School of Social & Behavioral Sciences • CIDP • May 2025

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**Participant Name**

**AUID**

$$\begin{array}{rcccl} \text{Total} & - & \$ & - & \$3,900.00 & \$ & 3,900.00 \\ \text{Tour Cost} & \frac{\quad}{\text{\# UG Credits}} \times & \frac{\quad}{\text{tuition per credit}} + & \frac{\quad}{\text{Tour fee}} = & \frac{\quad}{\text{Total tour cost before financial aid}} \end{array}$$

I agree to participate in the Community & International Development Tour to Madagascar directed by Dr. Joel Raveloharimisy, which will take place in May 2025. I understand that the total cost of the study tour is \$3,900.00. I commit and agree to paying this total amount subject to the information provided below, independent of whether I receive academic credit or not.

I acknowledge and agree that after reservations have been made in my name - including, but not limited to, airfare, lodging, transportation, entrance fees, etc - I will be responsible for bearing the cost of any cancellation or change fees or the complete cost if they are not refundable.

I acknowledge and agree that, by signing this document, I am committing to paying the entire Study Tour cost. If, for any reason, I change my plans and cancel my participation in the study tour, I recognize that I will be responsible for up to the entire amount of the study tour cost. The University will work to find a suitable replacement or to otherwise minimize and reduce the costs I would need to bear, but I fully accept that I may have to pay up to the full amount of the study tour cost if I withdraw from the study tour. I authorize Andrews University to charge me up to the full amount of the study tour.

The cost of participation in the study tour covers airfare, lodging, activities and meals as indicated on the itinerary, and basic travel insurance. I recognize that all other costs associated with my participation in the study tour (including meals not listed on the itinerary) will be my personal financial responsibility.

I agree to participate in all social and spiritual activities required prior to and during the tour, and I acknowledge that any failure to participate may affect my participation in the study tour experience.

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**Participant Signature**

**Date**

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**Parent/Guardian Signature** (if participant is under 18)

**Date**

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**Parent/Guardian Name & Email Address** (if participant is under 18)

**Parent/Guardian Phone #**