

Glacier School US Members Application

page 1 of 4: Trip Registration Form

Please print out, carefully read, and answer the following, then sign. Please use a separate sheet of paper, if necessary. Thank you. SummitClimb Inc., Box 123, Lakebay, WA, 98349, USA. email: info@SummitClimb.com, tel: 360-570-0715, Please visit our web page: www.summitclimb.com

Below is a list of items you need to send us in order to become a member of the team.

A. Items to be sent at this time (please add a check mark in the box: (x):

Completed 4 page application;

B. Items due not less than 2 months prior to departure: (please add a check mark in the box: (x):

Arrival date and time at destination city (trip starting point) including flight number and name of airline;

Proof of travel insurance;

Proof of mountain rescue and repatriation insurance (additionally, cancellation insurance is advised);

Please fill out the application below. Please use another sheet of paper if necessary

1) A. Trip name:

B. Date of trip departure:

2) Your surname as it appears on your passport or drivers license (family, or last name):

3) Given names as they appear on your passport or drivers license (first, and middle names):

4) Nickname (the name you prefer to be called):

5) Gender (male or female):

6) Date and place of birth:

7) Nationality:

8) Current address (including country), e-mail address, telephone number (landline and mobile):

9) Permanent address, e-mail address, phone (landline and mobile), if different than current address:

10) Place of employment - company name, address, e-mail address, phone (landline and mobile):

11) Your occupation (job title):

12) Emergency notification name, relation, address, e-mail address, phone (landline and mobile).

13) Climbing background (climbs, type of trip, dates, routes, difficulties, grades, season, altitude, and locales):

14) Camping, backpacking and hiking background (have you done overnight camping while carrying a rucksack containing all of your necessities - tent, food, sleeping bag, etc):

15) Please discuss fitness training plans and schedule, with types and amounts of exercise:

16) Where did you hear about our organization? If a friend referred you please mention their name and contact details, so that we may send them a thank you gift.

17) What is your favorite climbing, trekking, outdoor shop in your area?

18) What are your goals for what you would like to achieve during the school and what might you like to do in the future with the skills you have learned? What trips would you use this as training for? Is part of the reason you are hoping to join our school that you want to see if you enjoy mountaineering?

Please read and sign the following:

I agree that all of the information contained in this TRIP REGISTRATION form is true and correct.

Your signature _____

Today's date _____.

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Please read carefully and sign. In consideration of the services of SummitClimb Inc., their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "S.C. INC."), I hereby agree to release and forever discharge S.C. INC. on behalf of myself, my children, my parents, my spouse, my siblings, my other relatives and/or dependants, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that the glacier school entails known and unanticipated risks, which could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. These inherent risks are some of the elements that contribute to the unique character of this activity. These same elements can be causes of loss of or damage to my equipment, accidental injury or illness or, in extreme cases, permanent trauma or death. I understand that S.C. INC. does not want to frighten me or reduce my enthusiasm for this activity, but believes it is important for me to know in advance what to expect and to be informed of the inherent risks. I understand that such risks cannot be eliminated and are an inherent part of the activity.
2. The risks include, among other things: the hazards of walking on uneven terrain and slips and falls; being struck by avalanche, rock-fall, icefall or other objects dislodged, dropped, or thrown from above; the use of climbing ropes and equipment; the forces of nature, including lightning, weather changes, earthquake and avalanche; the risks of falling off the rock, ice, mountain or into a crevasse; the risks of exposure to insect bites and numerous diseases, digestive tract infections and ailments; the risk of altitude and cold including hypothermia, frostbite, acute mountain sickness, cerebral and pulmonary edema; my own physical condition, and the physical exertion associated with this activity, and other natural occurrences; misuse, failure or loss of equipment; shortage of food or water supply; the forces of nature; acts or omissions of S.C. INC.; travel by automobile or other means of conveyance; All of the risks are complicated by the potential difficulty or lack of rescue, including unavailability of light aircraft and no helicopter rescue. S.C. INC. organizers, leaders, guides, and staff have difficult jobs to perform. Guides leaders and staff may not be present at any time. When present, they seek safety, but they are not infallible. They might be unaware of a participant's fitness, abilities, pre-existing conditions, or ill health. They might misjudge a participant's health or illness, at anytime during the expedition. They might misjudge the weather, the elements, or the terrain. They may become incapacitated or distracted. They may make errors of judgment, mistakes, or be negligent. They may give inadequate warnings or instructions. Equipment being used may malfunction, wear-out, break, be lost, be inadequate, and be worn-out, poorly maintained, or missing. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, I am fully aware of the risks, and I elect to participate in spite of the risks.
3. I acknowledge that engaging in this activity may require a degree of skill and knowledge different than other activities and that I have responsibilities as a participant. I acknowledge that the staff of S.C. INC. has been available to talk to me extensively and more fully explain to me the nature and physical, mental, and experiential demands of this activity and the inherent risks, hazards, and dangers associated with this activity. However, I understand that this is not a formal climbing school, nor is this a guided expedition, and that I am expected to have a level of proficiency commensurate with the activity of mountain climbing and technical climbing in all conditions.
4. I certify that I am familiar with the dangers, hazards and risks incident to mountain climbing as above. I accept and clearly understand that these hazards and risks may result in personal injuries to myself and others and hereby expressly assume all of the above risks including; the risks of acts or omissions of S.C. INC. and do hereby expressly agree to hold S.C. INC. harmless and defend S.C. INC. against any and all liability.
5. I understand that should I become ill and/or have to leave the expedition early for any reason, I will visit a doctor/hospital immediately, before flying home, in the nearest town or city, and obtain a letter of medical advice describing my condition/symptoms and medical reason for early departure. I will furnish a copy of said letter to S.C. INC. immediately before my departure and I, myself will furnish a copy of said letter to my insurers.
6. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless S.C. INC. from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of S.C. INC.'s equipment or facilities, including any such claims which allege negligent acts or omissions of S.C. INC.
7. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless S.C. INC. and any of its assigns or other delegated persons from any and all claims, demands, or causes of action, which are in any way connected with the use of my image, words, voice, video or likeness which are in any way connected with my participation in this activity, in any electronic, electromagnetic, digital, photographic, print, sound, or audio-visual format in regards to advertising, promotions, marketing, cybercasts, literature, newspaper/journal articles, television, documentary films and video, radio, recordings, websites, email, social media and/or any other use which S.C. INC. deems fit.
8. Should S.C. INC. or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
9. In consideration of the services furnished me, and to be furnished me as a member of this glacier school, I hereby release S.C. INC. and all the members of the glacier school from any and all damages, injuries, losses, or any cause of action which may result in me, my legal representatives, heirs, or others purporting to exercise statutory or other rights arising out of, or in connection with this glacier school. And I hereby assume each and every damage incident to my participation, and agree to indemnify and hold harmless S.C. INC. and all members of the glacier school against any sums which they, or any of them may be subject to pay in consequence of any claim or demand by or through me, or resulting from my being a member of this glacier school. By signing this document I acknowledge that if anyone is hurt or property is damaged or any financial or other loss occurs before, during, or after my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against S.C. INC. on the basis of any claim from which I have released them herein.
10. If any portion of this agreement is unenforceable, the remaining portions shall remain in full force and effect.

I have had sufficient opportunity to read this entire document entitled PARTICIPANT AGREEMENT, RELEASE, RISK ACKNOWLEDGEMENT STATEMENT. I have read and understood it, and I agree to be bound by its terms.

I am aware that this is a release of liability, a legally binding and enforceable contract between myself and S.C. INC.

Signature of participant: _____

Print full name _____.

Today's date: _____.

Name of trip and departure date of trip: _____.

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page 3 of 4: Terms and Conditions of Booking

Please Read Carefully and Sign. Thank You.

TRAVEL AND RESCUE INSURANCE. The participant certifies that adequate insurance has been obtained to cover any injury or damage or financial or other loss participant may cause or suffer while participating in all aspects of the glacier school, including travel, rescue, life, health, trip interruption and cancellation. Participant further certifies that there are no medical or physical conditions which could interfere with participant's safety in this activity. Participants are strongly advised to purchase trip interruption and cancellation insurance.

PARTICIPANT RESPONSIBILITIES: Trip participants are responsible for their own well-being. This includes good health and strong physical condition. Participants joining the glacier school may be required to obtain a physician's release prior to departure. All members are responsible for: having the skills and knowledge required for each climb, knowing all pre-departure information, preparing proper equipment, clothing, snack-energy food, visas, insurance, flights, acting in a safety conscious, team-spirited, considerate manner toward all group members and with respect for each country's customs, environment, and people, and conforming to basic standards of personal and group hygiene (to minimize the risk of traveler's diseases, and pollution of the environment).

AIRLINE AND VEHICLE RESPONSIBILITY: Participants are responsible for arranging their own air transportation to and from the starting location/region of the glacier school. Participants are also responsible for arranging their own vehicle transportation throughout the school, during shopping trips, drives between destinations, to/from the mountain, in town, to/from the airport, etcetera.

If any portion of this agreement is unenforceable, the remaining portions shall remain in full force and effect.

I fully understand and do agree to all of the statements and conditions contained in the TERMS AND CONDITIONS OF BOOKING as detailed in this document.

Signature of participant: _____

Print full name _____.

Today's date: _____.

Name of trip and departure date of trip: _____.

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Read, Complete and Sign. Use a separate sheet of paper, if necessary.

It is important that you FULLY DISCLOSE any medical conditions, disabilities, prior accidents/conditions, medications (attach a separate sheet if necessary).

1. Have you ever had frostbite or any related cold weather injury/illness? No Yes. Please Describe:

2. Have you ever experienced any form of altitude illness? No Yes. If so, please describe symptoms, rate-of-ascent, altitude, medication and recovery procedures:

3. Please list any/all limitations or medical conditions and health concerns that may restrict your ability to climb on this trip? (i.e.: "**Previous Injury**", "**Prior Surgery**", "**Asthma**", "**Pregnancy**", "**Diabetes**", "**Heart Condition**", "**Epilepsy**", "**High Blood Pressure**", "**Depression**", "**Anxiety**".) Note to those persons with health concerns: We do not discriminate based on medical conditions, disabilities, nor upon health issues.

Do you have any such conditions? No Yes. Please describe:

4. Do you have arm, shoulder, back, neck, hip, knee, or ankle problems? No Yes. Please describe:
5. List completely any/all medications you will be taking on this trip and the medical conditions requiring them:

6. List any/all allergies to food and/or medication:
7. Dietary restrictions (specify): None Vegetarian Other:
8. Height:_____ Weight:_____
9. Smoker. Nonsmoker
10. Do you wear corrective lenses (contact lens wearers must bring prescription glasses in case of emergency)? No Yes
11. Are you familiar with standard first-aid and current Cardio-Pulmonary Resuscitation (CPR) techniques? No Yes, Please describe training/source of knowledge:

12. Are you familiar with altitude sickness, high altitude pulmonary edema, high altitude cerebral edema, and recognition of their symptoms, prevention, and treatment? No Yes, Please describe training/source of knowledge:

13. Are you familiar with frostbite, and cold-related injuries, recognition of symptoms, prevention, and treatment? No Yes, Please describe training/source of knowledge:

14. Are you afraid of heights? - Not sure, - A little, - Yes, - A lot. If yes, please describe:

Signature of participant:_____

Print full name_____.

Today's date:_____.

Name of trip and departure date of trip:_____.

SummitClimb Inc.

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Please visit our web page: www.SummitClimb.com