

## **Trip Registration Form**

	Personal Information	
Name as it appears on passport		
Passport Number & Issuing Country		
Name of Group		
Departure Date		
Date of Birth	/ /	
Select One	male / female	
Pronouns (optional)		
Mailing Address		
Phone		
Email address		
	Medical Information & Emergency Contacts	
Allergies		
Dietary Restrictions		
Injuries/Illnesses		
Current Medications		
Emergency Contacts		
Emergency Contact 1: Name	ne must NOT be travelling with participant	
<u> </u>		
Relationship to Traveler		
Phone Number		
Emergency Contact 2: Name		
Relationship to Traveler		
Phone Number		

Please send all forms and deposit amount of \$400 per traveler by check or money order to the address below:

## **Friends of the Rainforest**

1324 Clarkson Clayton Center, #312 Saint Louis, Missouri 63011 trips@friendsoftherainforest.org



## ASSUMPTION OF RISK AND LIABILITY RELEASE AND WAIVER

The parties to this Release are	(Participant),	vas "Particinant" and
Friends of the Rainforest. ("FOTR") and Natural Solutions –Costa Ric		as rancipant, and
Participant acknowledges that he or she has voluntarily applied to part	icipate in the trip to	("Trip Event").
This form confirms Participant's understanding and agreement to	the following:	
1. <u>Travel Arrangements/Third Parties</u> . Participant understands that FOTR and acts or omissions of any transportation carrier, hotel, or other provider of food Participant understands and agrees that FOTR and NSCR are not responsible a any wrongful, negligent or willful acts or omission of such Third Parties.	, goods or services ("Third Parties") involved	in the Trip Event.
2. <u>Assumption of Risk and Waiver of Liability</u> . Knowing the dangers and risk participate in it, on behalf of Participant, Participant's family, heirs and persor forever discharges and covenants not to sue NSCR or FOTR, its governing bow "Releasees") from and against any and all liability for any harm, damage, clain have or that may hereafter accrue to Participant, arising out of or related to any suffering or death, that may be sustained by Participant or by any property bell Participant's participation in the Trip Event, whether caused by the negligence this Release shall be deemed a release, waiver, discharge and covenant not to sindemnify and defend Releasees from any claim by Participant or Participant's 3. <u>Acknowledgement of Risks</u> . Participant understands and appreciates the dato, traveling to, within and from the Trip Event, unfamiliar or different terrain, accidents and illnesses, all of which could include injury, death, property dama including individuals acting on its behalf, cannot and does not assume response	all representatives, and Participant, in advance, and, officers, agents, employees and volunteers m, demand, action, cause of action, cost or exp y loss, damage or injury, including but not limit onging to Participant that arises or results direct or carelessness of the Releasees. It is Participate Releasees. Participant further agrees to say a family arising out of participation in the Trip angers and risks inherent in the Trip Event, including the content of the properties of the results of the properties and risks inherent in the Trip Event, including the properties of the prope	releases, waives, so (collectively, the bense that Participant may itted to physical injury, ettly or indirectly from beant's express intent that we and hold harmless, Event.  Eluding, but not limited lasters, inclement weather, at FOTR and NSCR,
there from even if such injury or damage is the result of the negligence of FOT		roperty aminage anomg
4. <u>Severability</u> . It is understood and agreed that, if any term or provision of the governing law, the validity of the remaining portions shall not otherwise be af		, or in conflict with any
5. <u>Governing Law and Venue</u> . This Release shall be construed in accordance agree to submit any cause of action arising from or related to the Trip Event to Missouri. The venue for any action arising from or related to the Trip Event shall be construed in accordance agree to submit any cause of action arising from or related to the Trip Event shall be construed in accordance agree to submit any cause of action arising from or related to the Trip Event shall be construed in accordance agree to submit any cause of action arising from or related to the Trip Event shall be construed in accordance agree to submit any cause of action arising from or related to the Trip Event shall be construed in accordance agree to submit any cause of action arising from or related to the Trip Event shall be construed in accordance agree to submit any cause of action arising from or related to the Trip Event shall be construed in accordance agree to submit any cause of action arising from or related to the Trip Event shall be construed in accordance agree to submit any cause of action arising from or related to the Trip Event shall be construed in accordance agree to the trip Event shall be construed in accordance agree to submit a shall be construed in accordance agree to submit a shall be construed in accordance agree to submit a shall be construed in accordance agree to submit a shall be construed in accordance agree to submit a shall be construed in accordance agree to submit a shall be construed in accordance agree to submit a shall be construed in accordance agree to submit a shall be construed in accordance agree to submit a shall be construed in accordance agree to submit a shall be construed in accordance agree agree agree to submit a shall be construed in accordance agree agr	the jurisdiction of the appropriate court in the	County of St. Louis,
THIS IS A RELEASE OI I ACKNOWLEDGE THAT I HAVE READ THIS RELEASE AN		D EFFECT.
I have carefully read and freely signed this Release.		
Participant Signature:	Date:	
Name of Participant (print):		
I have carefully read and freely signed this Release. I, the un Participant listed above, do hereby consent to his or volunta agree that I am executing this Release on behalf of myself an	ry participation in the Trip Event. I	recognize and
Signature of Parent or Legal Guardian (if Participant under 18):	Date	:
Name of Parent/Guardian (print):		



Acknowledgment of Medical Responsibility and Release

I,	_, have been advised by Friends of the Rainforest (FOTR) to purchase
independent medical insurance for the FOTR trip be	eginning on and ending on
	for personal reasons, <b>OR</b> because I already have medical insurance that covers m
	any and all costs arising out of this decision and agree to hold harmless the Friend
of the Rainforest (FOTR) and any of its independen	t contractors, employees, officers or directors, board members or affiliates I agree
to hold all the above named entities harmless for any	y costs, lost property, Acts of God, and/or injuries, regardless of who is
responsible, arising from my trip.	
Participant Signature:	Date:
Friends of the Ra	inforest - Travelers Insurance Release Form
	recommends that trip participants purchase traveler's insurance, especially if you
	ne suggested agency is Access America, which offers a wide range of travel
Access America	email: customerservice@accessamerica.com
P.O. Box 71533	phone: 1-800-284-8300 (toll-free)
Richmond, VA 23286-4684	fax : 1-800-346-9265 (Customer Service Inquiries)
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I (We) have purchased such a policy or are cowith you when you travel.)	wered with our home/work policy. (Please be sure to bring proof of this insurance
	's insurance. I accept responsibility for any and all costs arising out of this
	(FOTR) and any of its independent contractors, employees, officers or directors,
	hold harmless the Monteverde Conservation League in Costa Rica and any of its
independent contractors, employees, officers or dire	ctors, board members or affiliates.
I (We) agree to hold all the above-named enti	ties harmless for any costs, injuries or lost property, regardless of who is
responsible, arising from my trip.	
	<b>D</b> .
Participant Signature:	Date:
	Photo Release
I give my written consent that all of the photos I have	ve taken, in whatever form, and supplied to FOTR regarding the Costa Rican
rainforest and the Children's Eternal Rainforest can	be used for onsite educational purposes, posted on a website, used in any
	ven credit for the photo. I give permission for photos that include my image to be
	cable, I also give permission for photos of my children to be used in any
professional manner by FOTR as long at their name	
professional mainer by POTK as long at their hame	(5) are not included.
Participant Signature:	Date: