

# TWEEDSMUIR TREK

## REGISTRATION FORM

### EXCHANGE STUDENT TRIP INTO TWEEDSMUIR PROVINCIAL PARK

#### Student

Last Name:

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Given Names:

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Present Home

Address:

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Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Sponsoring Rotary Club in Canada:

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Host Family (Name and contact information):

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Name of group medical coverage:

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Group number: \_\_\_\_\_ Identity number:

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# TWEEDSMUIR TREK

## MEDICAL ALERTS

Serious known allergies

Precautions to be taken

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

Known allergies to medicines or drugs:

Allergy injections or drugs being taken:

Please list any medications you will be bringing with you on the trip:

If there is any other information you feel we should know about the participating student, explain below:

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Present Sponsor Signature

### **Rotary Rules of Conduct:**

At this point you should be familiar with the Rotary Rules of Exchange (no illegal use of alcohol or drugs, no driving of motor vehicles, no romantic involvement or sexual activity). Please sign in the appropriate spot to indicate that you are clear about the standard to which you are being held:

# TWEEDSMUIR TREK

**I understand that if, at any time during the trip, I do not observe the Rotary Rules, I will forfeit my participation in the Tweedsmuir Trek. I will be flown home to my host city at my own cost.**

Signature of Participant \_\_\_\_\_

Date \_\_\_\_\_

Signature of Parent/Guardian or Counsellor \_\_\_\_\_

Date \_\_\_\_\_

# TWEEDSMUIR TREK

ROTARY CLUB OF BURNS LAKE  
PO Box 616, Burns Lake, BC V0J 1E0

## **WAIVER OF LIABILITY** **Tweedsmuir Trek**

I, \_\_\_\_\_, do hereby apply to participate in the Tweedsmuir Trek organized by the Rotary Club of Burns Lake beginning August 18<sup>th</sup>, 2017 and ending August 23<sup>rd</sup>, 2017.

Accepted as a participant in the Rotary Club of Burns Lake (herein referred to as the Rotary Club) Tweedsmuir Trek, including field trips and other excursions, I fully understand and agree that while I am a participant in this program, my personal needs or requirements are entirely my own responsibility, including care and protection of belongings and equipment, tools, personal safety, personal insurance coverage, etc. I accept as my personal risk the hazards inherent in participating in these activities including transportation to and from Burns Lake and during field trips and excursions. I will not hold the Rotary Club or its representatives responsible or liable for any injuries, mishaps, loss or damage to personal property, or any other eventualities on, or relative to, the Tweedsmuir Trek. In consideration of the Rotary Club accepting my application, I hereby release and forever discharge the Rotary Club, its officers, directors, employees, volunteers, and agents from any liability whatsoever arising as a result of my participation in the above activities. I hold harmless and indemnify the Rotary Club from any and all liability for any property damage or personal injury, including to third parties resulting from participation in field trips and excursions. This agreement shall be effective and binding upon my heirs, next of kin, executive, administration, assigns, and representatives in the event of my death.

I also give my consent for the publication of my name, photograph and/or comments for purposes consistent with the Tweedsmuir Trek, as well as for the Rotary Club of Burns Lake promotional materials.

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Signature of Applicant Parent/Guardian

\_\_\_\_\_  
Signature of Witness