

SKI AND READ—SPRING 2022



HONR 124 Ski and Read (1 credit); January 15-17, 2022—Preference will be given to Honors Freshmen who did not participate in the Fall 2021 Hike and Read. This 1 credit Honors course affords Honors students the opportunity to interact informally with their peers, Honors staff, and National Park Service employees in the world's first national park. Engage in lively discussions on resource management issues, including park visitation, wolves and bison. All inclusive cost is \$375.00 for weekend (transportation, lodging, meals, etc.)! This \$375 course fee will be assessed to your student account upon completion of this form and attached materials (Medical Insurance Information and Signed Liability and Photo Releases). We will register you upon receipt of all materials.

REGISTRATION

Student Name _____

Cell Phone _____ E-mail _____

Special Needs/dietary restrictions _____

Activity Preference (trip total mileage):

Cross Country Skiing Level:

XC 1 (10 Miles) Elev. Gain = 1000 ft (for intermediate/advanced skiers)

XC 2 (5 miles) Elev. Gain = 200 ft (for beginners) - This option includes a drive through the Lamar Valley for wildlife watching as well)

NOTE: If you do not own your own outdoor equipment, you may rent from MSU's Outdoor Recreation Dept. at 1401 West Lincoln Street, near the Roskie Hall Parking Lot. *Skate Skiing equipment is not recommended for this trip.*

Student Signature: _____ DATE _____

CONTRACT FOR PARTICIPATION

Honors Ski and Read
January 15-17, 2022

In consideration of my participation in these activities, I hereby freely accept the following contractual representations and agreements:

I am aware that participation in travel activities involves inherent risks which present the possibility of serious physical injury, mental trauma or death. I fully realize the dangers of participation in activities of this nature and voluntarily assume all risks associated with such participation. I understand that medical insurance is not provided. I am therefore responsible for all expenses related to injury or illness.

I agree that it is my sole responsibility to be familiar with the physical and/or mental demands associated with these activities. With this in mind, I have no physical or mental condition which, to my knowledge, would endanger myself or others if I participate in these activities.

I agree to abide by established rules or regulations while participating in these activities including not using any alcohol or illegal substances. I will refrain from activities not associated with the planned tour and will not leave the Hotel without an approved chaperone. I also accept financial responsibility for damage or loss of group and rental equipment due to misuse or neglect.

I understand and agree that conditions may arise during these activities which may be beyond the control of the coordinators, instructors or other participants. I therefore release, forever discharge and agree not to sue the Honors College, Montana State University, the State of Montana or other participants. I hereby waive all claims which I now have or may hereafter have against the above organizations or persons, however caused, in regard to my participation in these activities.

I agree, for myself and my successors, that the above representations and agreements are contractually binding and are not mere recitals. I agree that my failure of refusal to sign other such agreements or releases shall in no way affect the validity of the agreement nor revoke or cancel any of the terms. Furthermore, in the event that a claim or suit is brought forth in violation of this agreement, I or any of my successors shall be liable for the expenses incurred by the other party of parties in defending against such actions. This agreement may not be modified orally.

I have read this document and fully understand its contents. I am aware this is an assumption of risk/release of liability, a waiver of claims and an agreement not to sue. This contract is entered into between myself, the Honors College, Montana State University and for the benefit of others previously described.

Name – print

Signature

Ski and Read 2022
Activity

Date

INSURANCE

Participants must assume sole responsibility for medical/emergency expenses due to personal injury or illness, including evacuation and rescue costs.

HEALTH STATEMENT

List any physical disabilities, conditions, past injuries or any other limitations which may affect your participation:

List any allergies, medications and/or medical alert information:

EMERGENCY CONTACT

Name: _____
Address: _____

Phone: Home: () _____
Work: () _____

Name: _____
Address: _____

Phone: Home: () _____
Work: () _____

PHYSICIAN

Name: _____
Address: _____

Phone: Home: () _____
Work: () _____

Name: _____
Address: _____

Phone: Home: () _____
Work: () _____

I hereby grant permission for emergency medical services for my minor child or ward.

(parent or guardian signature and date)

Send Confirmation to the following address:

SPECIAL NEEDS / REQUESTS:

