

# THE COLORADO TRAIL FOUNDATION

## **2008 TRAIL CREW REGISTRATION FORM**

1. **CHOOSE A CREW** Indicate your first crew choice(s) by circling the crew number(s) below.
  - a. **IF MORE THAN ONE PERSON** duplicate a copy of this *REGISTRATION FORM* for each person (copies are available on our website) and **mail together**. If you must be on the same crew note that on each *REGISTRATION*.
  - b. **ALTERNATIVE CREW CHOICES** If your first choice is full, but you would accept an alternate crew assignment(s), please write the number(s) in the slots below.
  - c. **MULTIPLE CREWS** (if applicable) You may participate in additional crews for one registration fee. (COMBINATIONS OF WEEKLONG AND WEEKEND CREWS ARE \$50. MULTIPLE WEEKEND CREWS ARE \$25.) Please circle all crew numbers in which you definitely plan to participate.
  - d. **PARTIAL CREWS** Crew leaders can sometimes make special arrangements to accommodate a volunteer who wants to participate for a portion of the crew. Please communicate with the crew leader(s) in advance.
2. **PRINT LEGIBLY + FILL IN** all lines on this *REGISTRATION FORM* including contact, payment and personal info.
  - a. **YOUNG PEOPLE** under 16 years of age are accepted only if accompanied by an adult.
  - b. **REGISTRATION FEES** Weeklong \$50 per person, Weekend \$25 per person. (Check, MC or VISA as below.)
3. **COMPLETE** the *WAIVER*. (For each participant under age 18, also complete back of *WAIVER*.)
4. **MAIL TOGETHER** the *REGISTRATION FORM(S)* + *WAIVER(S)* + *REGISTRATION FEE(S)* to the CTF.

**CONFIRMATION AND REFUND POLICY:** Your registration will be confirmed in writing within 30 days. If you provide an email address, you will receive your confirmation via email. Crews are filled on a first-come basis depending on the date your registration is received in the CTF office. Once you are confirmed for one of your requested crews, the registration fee becomes non-refundable. If you need to cancel, please communicate to the CTF office-thanks! (Connecting with us may enable participation by another volunteer.)

**Circle Crew Selection(s):** (Note: The '08 suffix on the end of the crew numbers refers to the year. For example, 0108 is crew 01 of 2008.)

Weeklong: **0108** **0208** **0308** **0408** **0508** **0608** **0708** **0808** **0908** **1008**

Weekend: **WE1** **WE2** **WE3**

**Alternate Crew Choices:** Write crew number in order of preference: 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_ 4<sup>th</sup> \_\_\_\_\_

**WE1** (National Trails Day!) **REGISTER & Info:** via the Adopter, Colo Mtn Bike Assoc, [www.CoMBA.org/NTD-2008](http://www.CoMBA.org/NTD-2008)

**WE3 REGISTER & Info:** Trails 2000, Mary Monroe, (970) 259-4682 or [Mary@Trails2000.org](mailto:Mary@Trails2000.org).

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DAY PHONE \_\_\_\_\_ NIGHT PHONE \_\_\_\_\_

CELL PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

Credit Card Payment Authorization	
MC/VISA #	_____
Exp. Date	_____
Name on Card (print)	_____
Signature	_____

Registration Fee = \$ \_\_\_\_\_ (Enclose check payable to The Colorado Trail Foundation or complete Credit Card above.)

PERSONAL INFORMATION - Please include this information: Age \_\_\_\_\_ Sex \_\_\_\_\_

PERSON TO CONTACT IN CASE OF EMERGENCY: (name, address, telephone) \_\_\_\_\_

Past Trail Crew Experience: \_\_\_\_\_

Can you accept and open your crew info as an email attachment in MS Word or Excel? YES \_\_\_ NO \_\_\_

Can you help others with transportation to the meeting site? \_\_\_\_\_ If so, how many? \_\_\_\_\_

Can you provide 4WD on jeep-ins? \_\_\_\_\_ Do you need transportation assistance? \_\_\_\_\_

**MAIL this completed REGISTRATION FORM + WAIVER + REGISTRATION FEE to:**

THE COLORADO TRAIL FOUNDATION ♦ 710 TENTH STREET #210 ♦ GOLDEN CO 80401

Phone: (303) 384-3729 Fax: (303) 384-3743 Email: [ctf@coloradotrail.org](mailto:ctf@coloradotrail.org) Web Site: [www.coloradotrail.org](http://www.coloradotrail.org)

# The Colorado Trail Foundation Waiver and Liability Release Agreement

As a participant in activities of The Colorado Trail Foundation, I agree to the following waiver and release:

- I, \_\_\_\_\_, acknowledge that backcountry travel, activities and work projects have  
(please print)  
risks, hazards and dangers that cannot be eliminated, particularly in a wilderness environment in mountainous terrain. ***I understand that these risks, hazards, and dangers, which may cause disability, injury and death, include without limitation:***
- risks from activities in areas where no outside services are available or provided; where rescue and medical services are limited and slow, if available at all; where trail or road conditions vary, are not maintained, and are unpredictable and changeable; where weather also is unpredictable and changeable; and where injuries could include, but are not limited to, cuts, wounds, contusions, broken bones, sprained muscles, animal or insect bites/stings, exposure, dehydration, hypothermia, frostbite, and head injuries;
  - risks involved in decision-making and route-finding in a wilderness environment; getting lost resulting in dehydration, hypothermia, or frostbite,
  - other risks, hazards, and dangers common to wilderness travel and outdoor activities that include, but are not limited to, trail construction and repair, camping, cooking, hiking, climbing, mountaineering, and backpacking.

I have read and understand the information provided by The Colorado Trail Foundation about the activities, work projects, and travel to and from such activities. I also understand that I have a responsibility for my own safety and the safety of others as a backcountry user.

\*\*\*\*\* Please initial here \_\_\_\_\_

I understand that participation in the travel, activities and projects of The Colorado Trail Foundation require good physical condition. I and/or my family, including my minor children, who are fully capable of participating in The Colorado Trail Foundation activities and willingly assume the risk of injury as my/our responsibility, including the loss of control or balance in walking, hiking, or climbing; weather; collision with trees, rocks, or other obstacles, whether obvious or not obvious. **I am voluntarily participating in activities and projects of The Colorado Trail Foundation with full knowledge of the risks, hazards and dangers involved.**

\*\*\*\*\* Please initial here \_\_\_\_\_

By my signature, for myself, my family (including minor children), my estate, and my heirs, I hereby **knowingly and intentionally release, indemnify and hold harmless The Colorado Trail Foundation**, its directors, officers, service providers, independent contractors, agents, employees, and volunteers from and against any and all claims, actions, causes of actions, liabilities, suits, expenses (including attorneys' fees) and **negligence** of any kind or nature, whether foreseen or unforeseen, arising directly or indirectly out of any damage, loss, injury, disability, or death to me or my property as a result of my participation in the activities and projects of The Colorado Trail Foundation, the use of its information or services and traveling in a wilderness environment in mountainous terrain, whether such damage, loss, injury, disability, or death results from **negligence** of The Colorado Trail Foundation, its directors, officers, service providers, independent contractors, agents, employees, or volunteers or from some other cause. I further agree not to sue The Colorado Trail Foundation, its directors, officers, service providers, independent contractors, agents, employees, and volunteers as a result of any damage, loss, injury, disability, or death that may occur while participating in its activities or projects. Also, I authorize the CTF, and or parties designated by CTF, to use my or my child's photo for sale or reproduction in any manner CTF desires, for advertising, display, audio visual, or other use.

I am over 18 years of age. **Yes / No** Initial here \_\_\_\_\_ (Parents signature and completion of back page also required if under 18)

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

NAME (print) \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

THE COLORADO TRAIL FOUNDATION

**Indemnification Agreement for Participants Under 18 Years of Age**

NAME OF PARTICIPANT: \_\_\_\_\_  
(please print)

For the minor named above who will participate in activities of The Colorado Trail Foundation in mountain regions of Colorado, I agree to the following waiver, release and indemnification:

The undersigned parent or guardian of said minor, for themselves and on behalf of said minor, joins in and agrees to the provisions of the "Liability Release Agreement" and hereby stipulates and agrees to save harmless, indemnify, and forever defend The Colorado Trail Foundation, its directors, officers, service providers, independent contractors, agents and employees, from and against any claims, actions, demands, expenses, liabilities (including attorneys' fees) and **negligence** made or brought by said minor or by anyone on behalf of said minor, as a result of said minor's participation in travel, activities and projects of The Colorado Trail Foundation, including the result of said minor's participation in the travel, activities and projects of The Colorado Trail Foundation, including without limitation, his or her use of property and facilities of The Colorado Trail Foundation, his or her participation in specific activities of The Colorado Trail Foundation, or his or her travel to and from the site of such activities.

**SIGNATURE of Parent or Guardian** \_\_\_\_\_ Date \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

(please print)  
STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_