

GSN-SC  
The Geological Society of Nevada, Southern Chapter  
Las Vegas, Nevada  
Field Trip Release of Liability Form

I, \_\_\_\_\_ understand and agree that field trips sponsored by the Geological Society of Nevada, Southern Chapter (GSN-SC) involve certain risks and that regardless of the precautions taken by the GSN-SC, some bodily injuries may occur.

Specific risks/hazards involved in field trips may include but are not limited to:

1. Driving to or from the field trip localities.
2. Twisting of joints or breakage of bones while hiking over irregular ground.
3. Snakebite, scorpions, and/or other wildlife poisons and/or toxins.
4. Problems related to exposures of elements such as: heat prostration, dehydration, sunburn, frostbite, death and allergic reactions
5. Injury from flying rock fragments related to breakage with a rock hammer.
6. Danger of being struck by automobiles while examining outcrops along roads.
7. Hydrochloric acid diluted with water.

Knowing this information, in consideration of my participation in field trips sponsored by the GSN-SC, I expressly and knowingly release the GSN-SC of Las Vegas and the Geological Society of Nevada (GSN) headquarters office in Reno, and all of their officers, agents, volunteers, and employees, from any and all claims and causes of action for property damage, personal injury or death sustained by me arising out of any travel or activity conducted by or under the auspices of the GSN-SC and GSN caused by risks associated by this activity and/or the negligence of the sponsoring group.

In addition, I understand and agree that the GSN-SC cannot be expected to control all of the risks articulated in this form but may need to respond to accidents and potential emergency situations. Therefore, I hereby give my consent for any medical treatment that may be required during my participation with the understanding that the cost of any such treatment will be my responsibility. The GSN-SC and GSN do not carry medical or accident insurance for the activities mentioned unless the participants are informed otherwise. As such, participants should review their personal insurance portfolio.

Finally, I voluntarily and knowingly agree to protect, hold harmless, and indemnify the GSN-SC and GSN, and their officers, agents, volunteers, and employees, against all claims, demands, or causes of action for property damage, personal injury, or death, including defense costs and attorney's fees arising out of my participation in the field trip or activity sponsored by the GSN-SC and GSN.

I have read the agreement and have willingly signed for the consideration expressed and with a full understanding of its purpose. Participant represents that he/she is eighteen (18) years of age or older and is otherwise competent to execute this agreement, or that his/her legal guardian is also signing.

Print Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Phone number \_\_\_\_\_

Emergency Contact & Number \_\_\_\_\_

Email address \_\_\_\_\_

Participant signature \_\_\_\_\_

Guardian signature (if less than 18 years old) \_\_\_\_\_