



Carpathian Mountain Outreach 2023

LIABILITY RELEASE

Carpathian Mountain Outreach 2023 will be a rigorous, physically demanding project, potentially requiring long hikes through mountainous areas of Ukraine. Ukraine is a country at war. Unforeseen dangers and serious injuries are a possibility. In the event of an emergency, the following information will enable us to better assist you.

Applicant Information

Your Name _____ Date of birth ____/____/____

Address _____

City _____ State/Prov. _____ Zip _____

Emergency Contact Information

Name _____ Relationship to you _____

Address _____

City _____ State/Prov. _____ Zip _____

Email _____ Phone _____

I, the undersigned, being at least 18 years of age, wish to participate in Carpathian Mountain Outreach 2023 (hereafter referred to as CMO 2023), which is organized and conducted by Euro Team Outreach, Inc. (hereafter referred to as ETO) in Ukraine. I understand that if I am less than 18 years of age, my parent or legal guardian must also sign below.

I UNDERSTAND THAT UKRAINE IS AT WAR, AND THAT TRAVEL TO UKRAINE CARRIES THE RISK OF BODILY INJURY, ILLNESS, AND DEATH. I HAVE CHOSEN TO PARTICIPATE IN CMO 2023 OF MY OWN FREE WILL, AND I AM FULLY AWARE OF THE AFOREMENTIONED RISKS INHERENT IN MY PARTICIPATION. I AGREE TO ACCEPT FULL RESPONSIBILITY FOR SUCH RISKS, INCLUDING THOSE CAUSED DIRECTLY OR INDIRECTLY BY MILITARY ACTION.

I understand that CMO 2023 will necessitate international travel. I agree to make all necessary medical preparations for such travel, which may include recommended vaccinations. I affirm that I am in good health, and do not suffer from any illness or medical condition which would render international travel unsafe. I agree to advise ETO Staff of any physical or mental limitations I may have prior to or at any time during CMO 2023.

I hereby release and indemnify ETO and ETO Staff of any and all liability, claims, and causes of actions arising out of or in any way connected with my participation in CMO 2023. I agree to allow ETO Staff to authorize medical treatment on my behalf should I or my above-named Emergency Contact be unable to do so. I also agree to accept full responsibility for any and all medical costs which may result from my participation in CMO 2023. I further agree to pay for any ancillary costs that arise because of a medical emergency, including, but not limited to, transportation costs, housing costs, extra food costs, etc.

I have read this release and understand its meaning.

Applicant Signature

Date

IF THE APPLICANT IS UNDER 18

I, the parent or legal guardian of the above named Applicant, hereby grant my permission for him to participate fully in CMO 2023. I have read and understood the above release, and my signature below indicates my full consent to the terms stated therein. I hereby release and indemnify ETO and ETO Staff of any and all liability, claims and causes of actions arising out of or in any way connected with the Applicant's participation in CMO 2023. I agree to allow ETO Staff to authorize medical treatment on my behalf should I or the above named Emergency Contact be unable to do so. I also agree to accept full responsibility for any and all medical costs which may result from the Applicant's participation in CMO 2023. I further agree to pay for any ancillary costs that arise because of a medical emergency, including, but not limited to, transportation costs, housing costs, extra food costs, etc.

Parent/Legal Guardian Signature

Date