



2010 Program Application & Registration

To reserve your space in one of our programs complete both sides of this form and a release of liability form, and return them to us with your deposit. We recommend that you register early in order to guarantee availability on the trip you want. Qualified applicants are registered on a first come, first served basis. Once your application is accepted we will contact you with additional trip information.

name: _____	address: _____		
city: _____	state: _____	zip: _____	country: _____
contact phone: _____	email: _____		
program name: _____	program dates: _____		
total trip fees: _____	deposit amount (25%): _____	balance due (75%): _____	balance due date: _____
emergency contact: _____	contact phone: _____	relation: _____	

Deposit & Payment Schedule

In order to secure your place in a program a deposit of 25% of the trip fees is due at the time of registration. We cannot hold your place without this deposit. The balance of the trip fees is due 60 days prior to the starting day of the trip for programs. This is the balance due date. For registration after the balance due date, full payment is due at the time of registration. If full payment is not received by the balance due date and other arrangements are not made with us, we reserve the right to consider your registration canceled.

Cancellation & Refund Policy

If you cancel your enrollment for any reason the following policy applies:

- Cancellation occurring after the balance due date will result in a complete forfeiture of all payments and deposit. The only exception to this occurs when we have somebody waiting to take your place, in which case we will refund all payments and deposit less a cancellation fee of \$100.
- If you cancel your enrollment before the balance due date you will receive a refund of all payments and deposit less a cancellation fee of \$100.
- If we cancel a trip due to inadequate registration you will receive a full refund of all payments and your deposit. With the exception of our trip fees, we are not responsible for other expenses you might incur (such as nonrefundable airline tickets or other travel and work arrangements) in the event that we cancel a trip.

Trip cancellation, Interruption & Emergency Evacuation Insurance

In order to protect yourself from the loss of nonrefundable fees we strongly recommend you purchase trip cancellation insurance. This type of insurance will allow you to recover fees resulting from cancellation due to personal or family illness occurring before or during your program. Most types also allow you to recover nonrefundable travel expenses in the event that we are forced to cancel due to inadequate registration. Emergency evacuation insurance, often included with trip cancellation, covers the normally very high cost of evacuation from remote mountainous areas. We strongly recommend that participants on trips to South America and Asia purchase emergency evacuation insurance. Policies are available through your insurance or travel agents.

Conditions of Participation

There are a number of conditions required for participation in our programs. These include, but are not limited to: 1) agreement with and understanding of the cancellation and refund policy, and 2) an acknowledgment of the requirement to read, understand and sign an Assumption of Risk and Release of Liability form which will be sent to you upon registration. You may request a copy in advance.

I have read and agree to the conditions of the Cancellation and Refund Policy set forth in this registration form.

I acknowledge and agree that as a precondition to my participation in the program for which I am registering I will be required to read, understand and sign a comprehensive Assumption of Risk and Release of Liability form as required by Cosley & Houston Alpine Guides.

Signature of Participant : _____ date: _____

Previous Experience & Medical Information

The completion of this portion of your application form helps us and you in a number of ways. It assists us in achieving the best match between your general climbing or skiing goals and the programs we offer. It aids us in helping you to maintain good health during your trip by alerting us to special medical requirements and concerns you may have, and it helps us in our general goal of reducing risk while maximizing and realizing your personal potential.

Please answer all questions. Attach a separate sheet if you need more room.

1. Do you have any allergies? Describe. If you have a known allergic reaction, such as to insect bites or specific foods, we strongly recommend you carry an anaphylaxis kit.
2. Are you allergic to any medications? Describe. If yes, please describe the nature and severity of your allergic reaction.
3. Do you have a history of asthma?
4. Have you ever had any joint injuries? Describe. Specifically, have you had injuries to knees, ankles or shoulders?
5. Are you currently taking any medication? Describe. Will you be taking any medication during this program?
6. Has altitude illness ever caused you significant discomfort, or prevented you from achieving climbing or skiing goals? Describe the circumstances.
7. Are there any medical or physical conditions which might limit or affect your participation in this program? Describe.
8. Do you have any special dietary requirements?

Date of Birth: year _____ month _____ day _____

Height:

Weight:

Outdoor Activity - Climbing and Skiing Experience

Please use a separate sheet of paper to answer the following questions.

1. Please give us a brief description of your current physical condition.
2. Describe your current level of regular exercise. We would like to know what activities you engage in, your history of involvement in those activities, how frequently you practice them, and for how long.
3. Climbing or skiing history. If it is extensive, highlights showing length of involvement and diversity will do. If you have not yet been climbing please give us a history of your previous outdoor experience, such as hiking, backpacking or skiing.
4. If you have been skiing or climbing with us before, please remind us of how the trip went for you, and the degree of success in achieving your objectives.

Please send your completed registration and deposit to:

Cosley & Houston Alpine Guides

151 Route de Lausenaz

74310 Les Houches, France

Questions?

phone in France +33 450 21 24 47

email kathyandmark@cosleyhouston.com



IFMGA Mountain Guides
AMGA Certified Guides



PARTICIPANT AGREEMENT, RELEASE AND ASSUMPTION OF RISK
Cosley & Houston Alpine Guides

In consideration of the services of Cosley & Houston Alpine Guides, their owners, participants, employees, and all other persons or entities acting in any capacity on their behalf, I hereby agree to release and discharge Cosley & Houston Alpine Guides, on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that my participation in mountaineering, rock and ice climbing and ski mountaineering entail known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

The risks include, among other things: the hazards of walking or skiing on uneven terrain and slips and falls; being struck by rockfall, icefall or other objects dislodged or thrown from above; the use of climbing ropes and equipment; the forces of nature, including lightning, weather changes and avalanche; the risks of falling off the rock, mountain or into a crevasse; the risks of exposure to insect bites; the risk of altitude and cold including hypothermia, frostbite, acute mountain sickness, cerebral and pulmonary edema; my own physical condition, and the physical exertion associated with this activity.

Furthermore, Cosley & Houston Alpine Guides employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They might misjudge the weather, or environmental conditions. They may give incomplete warnings or instructions, and the equipment being used might malfunction.

2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Cosley & Houston Alpine Guides from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of Cosley & Houston Alpine Guides's equipment or facilities, **including any such claims which allege negligent acts or omissions of Cosley & Houston Alpine Guides.**
4. Should Cosley & Houston Alpine Guides or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.
6. In the event that I file a lawsuit against Cosley & Houston Alpine Guides, I agree to do so solely in the Department of Haute Savoie, France, and I further agree that the substantive law of that location shall apply in that action without regard to the conflict of law rules of that location. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portion shall remain in full force and effect.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against Cosley & Houston Alpine Guides on the basis of any claim from which I have released them herein.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

Signature of Participant: _____ Print Name: _____

Address: _____

Phone: _____ Date: _____

PARENT'S OR GUARDIAN'S ADDITIONAL INDEMNIFICATION
(Must be completed for participants under the age of 18):

In consideration of _____ (print minor's name) ("Minor") being permitted Cosley & Houston Alpine Guides to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless Cosley & Houston Alpine Guides from any and all Claims which are brought by, or on behalf of Minor, and which are in any way connected with such use or participation by Minor.