PARTICIPATION AGREEMENT

Participant

I, _______________________________, have voluntarily joined with other individuals to participate in an Expedition to Heard Island, a territory of Australia in the Southern Ocean. The project is defined and described in documents posted on the website of the Expedition, http://www.heardisland.org. I take this action with full awareness of the requirements, limitations, and risks of the project.

Policies

I have read, understood, and agree to be bound by the Policies for the Expedition, as set forth in the Policies document and the corresponding section of the Participants’ Handbook.

Personal expenses

I agree that I am solely responsible for arranging and funding my personal travel, equipment, services, fees, accommodations, incidental travel, and all other personal expenses to the point of departure on the Voyage, and from the return point of arrival. I agree that the Expedition and its organizers and participants and supporting persons and organizations are in no way responsible for my personal expenses and actions.

Costs

I understand that all of the costs of the Expedition, excluding personal travel and related expenses from the point of departure and return thereto, will be paid by the Expedition. I have contributed the required monies to this fund for my participation. I understand that any surplus monies available at the end of the Expedition, after liquidation of excess property, will be divided among the Participants (and no others) on a proportional basis, unless otherwise authorized by the majority of the participants. Any small deficit will be retired by the participants.

Emergency

I have provided the Expedition with medical and emergency information. I agree to be responsible for the cost of transporting from any place visited during the Expedition to a suitable medical facility should I become ill or injured, and for subsequent medical and transportation costs related to that illness or injury. I agree to be responsible for reasonable incidental expenses incurred by others on my behalf in the event of such an emergency.

Waiver

I agree to hold harmless all members of the Expedition, specifically the organizers, onsite and offsite participants, and all organizations that have contributed monies and/or services to the Expedition. I specifically exempt Dr. Robert W. Schmieder and any persons associated with Cordell Expeditions from any liability of any kind. I agree that I will not seek compensation of any kind for any loss that I may incur during the period of this Expedition from any participant or combination of participants in this Expedition. This provision covers all incidents of any type, regardless of cause.

Binding

My agreement with these provisions, and the actions associated with and implied by this agreement, will be binding on all persons who would seek to represent my interests, including my heirs and counsel. It is my intention to hold all persons and organizations involved with the Expedition fully free and blameless forever.

Name ______________________________________ Signature __________________________________

Date _______________________________ Witness _______________________________