

EDTERRA EDVENTURES REGISTRATION FORM
'China – Great Wall to Great Power'

Please attach two
passport size
photographs here

PERSONAL INFORMATION

Participant's Full Name:

Sex: Male / Female

Date of Birth:

Nationality:

Blood Type:

Parent/ Guardian Information

Parent's/Guardian's Full Name:

Relation with the participant:

Full Address:

Telephone:

Office:

Home:

Mobile:

Email:

HEALTH HISTORY

Is the participant suffering from any medical condition? YES/NO

Is the participant under any form of medication? YES/NO

If you answered yes to either of the above questions, please state the medical condition **in detail** and provide the necessary medicines to EdTerra Edventures' representative, duly labeled with the participant's name and with clear instructions about the dose or application. (attach an additional sheet if required)

Is the participant allergic to anything? If yes, describe the allergy and the treatment provided.

Please use the space below to provide EdTerra with any other health information that may be beneficial for the participant during this trip. This will enable EdTerra to make any reasonable necessary individual arrangements for participants.

GENERAL INFORMATION

Cancellations, Refunds & Deposits:

If the tour is cancelled by us, you will be credited a full refund. If you cancel and you have contacted (in writing) our office at least two weeks in advance of the tour date, we will deduct Rs.1000/- and refund the money paid. If you cancel within two weeks of the tour date there will be no refund. All cancellations need to be made in writing and mailed to our address or emailed to us at info@edterra.com

Permission & Liability Waiver:

Participant, _____, has full permission to participate in the EdTerra Edventures journey "China – Great Wall to Great Power."

I, _____, as parent/legal guardian, do hereby grant the EdTerra Edventures staff and designated adults the right to authorize emergency medical treatment for my participant in the event that I or my designated representative cannot be reached.

I hereby grant permission to the staff of EdTerra Edventures and designated adults the right to take whatever steps may be necessary to obtain emergency treatment for my participant, should the situation arise. These steps may include, but are not limited to, the following:

In a life-threatening emergency or urgent situation, a staff member may call for medical assistance before making any attempt to contact the parents/guardians.

For a non-life-threatening emergency, they will attempt to call the parent/guardian first, and if they cannot reach them, they will attempt to contact the emergency contact listed in the form. If they can't make an appropriate contact, they will call paramedics.

I understand that EdTerra Edventures and its staff members will not be responsible for anything that may happen as a result of false information provided by parents/guardians, or as a result of the parent/guardian's failure to provide information at the time of application.

Indemnity

The participant including his/her guardian/parents agree to indemnify, defend or hold EdTerra Edventures and the school harmless from and against any and all loss (physical or material), damage, liability and expense (including reasonable attorney's fees and costs) arising directly or indirectly (including any third party claim, action or proceedings) out of the acts of omission or commission (including breach or alleged breach or failure to comply with any applicable laws or regulations) by the school or EdTerra Edventures or its agents.

All outputs produced during EdTerra journeys, including (but not limited to) photographs, videos, hard or soft copy text, magazines and photo books, shall remain the property of EdTerra Edventures in perpetuity.

Do to the possibility of changing local conditions as well as the availability of travel tickets and admission passes, EdTerra Edventures reserves the right to make alterations to the journey departure date and itinerary as is required.

Publicity Release Form:

I authorize EdTerra Edventures to use photographs, video or other images of my participant for public relations or marketing purposes.

Signature Parent/Guardian 1:

Date :

Signature Parent/Guardian 2:

Date: