



**ASSUMPTION OF RISK, RELEASE OF LIABILITY, WAIVER OF CLAIMS,
INDEMNITY, AND PARTICIPATION AGREEMENT**

READ CAREFULLY - THIS AFFECTS YOUR LEGAL RIGHTS

Excursionist Name: _____

Name(s) of any child(ren) accompanying Excursionist: _____

Excursion location and dates: _____

HumanEkdromi ("HE"), a Utah company located at 1135 North 650 East, Orem, Utah, 84097, is organizing the international humanitarian excursion identified above (the "Excursion"). I would like to participate as an excursionist in the Excursion. In exchange for being permitted by HE to participate in the Excursion, and as a specific condition to my participation in the Excursion, I agree to the following terms and conditions of this Assumption of Risk, Release of Liability, Waiver of Claims, Indemnity, and Participation Agreement ("Agreement").

I hereby agree to assume, and knowingly and voluntarily do assume, full responsibility for all risk of losses, expenses, or damages to my person or my property, including all risk of personal injuries (emotional or physical), illness, or death, that exist or may arise in connection with my participation in the Excursion and any other activity undertaken in connection therewith, whether such risks are presently known or unknown, and whether they may be caused by my own actions, the actions of HE or its representatives, the actions of others, or events beyond my control ("Risks"). Such Risks include but are not limited to the following: any and all risks associated with my own health problems and physical or emotional limitations; unpredictable and unreliable transportation; unsafe water and food; unstable political climate; dangerous weather conditions; the unavailability of medical facilities or the availability only of medical facilities falling below common North American standards; various circumstances that could result in my being lost or separated from HE representatives and other participants in the Excursion; emergency circumstances in which emergency equipment or arrangements may be unavailable or may fail, may fail to be provided in a timely manner, or may be negligently provided for any reason, including negligence in the training of emergency procedures or equipment; the careless or negligent conduct of the employees or agents of HE; the careless or negligent conduct of independent travel agents, transportation companies, hotels, private individuals, or other third parties; and the careless or negligent conduct of other participants in the Excursion who may be inexperienced, negligent, or reckless and may endanger my safety and/or the safety of other participants. I recognize and accept that these Risks are an inherent part of the Excursion, and I freely agree to assume all such Risks.

I hereby fully release HE and all its officers, employees, agents, and assigns ("Releasees"), without any limitation or qualification, and waive all liabilities, claims, demands, and actions which might be made

against Releasees by or on behalf of myself or my heirs, personal representative(s), or estate, for any losses, expenses, or damages to my person or my property, including all risk of personal injuries (emotional or physical), illness, or death, that exists or may arise in connection with the foregoing Risks or my participation in the Excursion.

I agree not to sue and I further agree to indemnify and hold harmless the Releasees from all claims, expenses, fees, liability, damage awards, or costs of any type whatsoever, including attorney fees and other litigation costs claimed for damage or injury resulting from my participation in the Excursion, unless any such damage or injury is primarily the direct result of a willful, reckless, or grossly negligent act or omission by HE or any of its officers, employees, or agents, and not caused in part by my own negligence.

I agree to obey all guidelines, rules and/or regulations relating to the Excursion, and agree to uphold individual and group standards set forth by HE personnel, including refraining from any use of alcohol or illicit drugs during the Excursion. I further agree to wear and use protective clothing and equipment as directed by HE or its officers, employees or agents.

I agree that sole responsibility for my personal safety remains with me, including my physical and emotional preparation and fitness to participate in the Excursion.

I understand that I am required to preserve the confidentiality of any information regarding participants. I agree to take pictures of participants only when I have verbal permission. I will comply with all HE's guidelines, policies, or direction regarding photographs taken during clinics.

I grant HE permission to reproduce photographs or movies of me taken during the period of time that I am participating in this program, including written statements I may make concerning this program.

I grant HE, or any of its officers, employees, or agents, full authority to take whatever action they feel is warranted regarding my health and safety and agree that they may arrange medical treatment for me at my expense. If I am traveling with a minor child (less than eighteen years of age) and circumstances render me incapable of authorizing medical treatment for my child, I grant HE the same authority to take action on behalf of my minor child. I agree to pay the costs of any rescue or medical attention rendered to me or for my benefit (or for the benefit of my minor child, if applicable), and I agree that if deemed necessary by the HE personnel or local medical authorities, I (or my child, if applicable) will be sent back to my home country at my expense for further medical treatment.

I acknowledge and agree that HE does not carry or maintain health, medical, or disability insurance for any participants of the Excursion. I agree to purchase International Travel and Health Insurance for myself and for any minor child who will accompany me, as required by HE, and that HE will be named on each such policy as an additional insured party. I understand that failure to obtain this insurance and demonstrate my coverage (and the coverage of my child, if applicable) under this insurance may affect my ability to participate in this Excursion.

I agree that this Agreement will be interpreted pursuant to the laws of the State of Utah and I understand that if I have any questions regarding this Agreement I should consult a lawyer prior to signing this Agreement.

I am at least eighteen years of age and have read and understood this Agreement. I am aware that by signing this Agreement, I am voluntarily waiving certain legal rights which I or my heirs, personal representative(s), or estate have, or may have, against the Releasees. I recognize the Risks inherent in the Excursion and associated activities, including hazards associated with travel to and from said Excursion

and activities. If I am traveling with a minor child, I agree that, as the parent or legal guardian of the child, I am the sponsor of my own child's travel and activities during the Excursion (not HE), and I am and will be entirely responsible for the safety and well-being of my child. I also assume full responsibility for the actions of my minor child while on the Excursion, and agree that any violation by my child of any of the terms or conditions of this Agreement will be construed as my own violation.

By my signature below, I affirm that I have carefully read this Agreement, I understand its contents and purposes, and I voluntarily agree to all the terms and conditions set forth above.

Signature: _____ Date: _____

Address: _____

In case of an emergency, please contact _____ (Relationship: _____)
at _____.