



**LETTER OF INTENT TO COMPLETE  
ALASKA HUMANITIES FORUM  
Educator Cross-Cultural Immersion**

I, \_\_\_\_\_ understand that the Alaska Humanities Forum has invested a great deal of time and resources in the Educator Cross-Cultural Immersion program, including text books, all costs associated with the training sessions and attendance at a culture camp including, airfare, hotel rooms, meals, camp fees, per diem, etc., therefore, ***I agree to the following:***

I understand that this is a program requires a significant amount work and time commitment.

***I agree to;***

- ***attend the entire Orientation on May 11<sup>th</sup> and 12<sup>th</sup>***
- ***upload my journal to the camp diary website by week after I return from camp***
- ***attend an Exit Interview***
- ***attend the Debrief on October 5<sup>th</sup> and 6<sup>th</sup>***
- ***give a professional level presentation on my experience***
- ***apply what I've learned to my classroom***

***I agree to pay for any airline change fees associated with changing my travel dates,*** i.e. I change my departure or return date in order to take extra personal days while traveling to my rural camp site.

I understand that as of **April 20**, all of the program's resources will be committed to a selected cadre of teachers and it will not be possible to substitute a teacher in my place, therefore;

***I agree that by signing and returning this letter of intent, I am making a commitment to fully participate and complete the program under the conditions listed above.***

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**In order to hold a place for you in the Educator Cross-Cultural Immersion Program, please sign and return this letter (post-marked) by Friday, April 27, 2012.**



## Emergency Information

\_\_\_\_\_  
First Name                      Middle Name                      Last Name                      Date of Birth

Name of Physician: \_\_\_\_\_

Physician Phone #: \_\_\_\_\_

Chronic Illness, Disease, or Condition (asthma, diabetes etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Allergies and Reactions (breathing problems, hives, rash, etc.)

Food: \_\_\_\_\_ Reaction \_\_\_\_\_

Medication: \_\_\_\_\_ Reaction \_\_\_\_\_

Other: \_\_\_\_\_ Reaction \_\_\_\_\_

I am taking the following Medication: \_\_\_\_\_

\_\_\_\_\_

I agree to have in force the following medical insurance plan:

Name of Health Insurance Carrier: \_\_\_\_\_

Insured Party: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**MEDIA RELEASE FORM**

Alaska Humanities Forum  
161 E. First Avenue, Door 15  
Anchorage, AK 99501  
(907) 272-5302  
FAX (907) 272-3979

For and in consideration of the opportunity and privilege of appearing in or participating in one or more video recordings, sound tracks, films, photographs, written articles, internet postings or recordings, I hereby consent to the use and editing thereof and release the Alaska Humanities Forum, Anchorage, Fairbanks North Star Borough, and Mat-Su School Districts and their employees and assignees from any and all claims resulting from such use, sale, editing and release to the newspaper and/or television stations/channels.

Dated this \_\_\_\_\_ of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Signature of Participant

The above consent and release is hereby ratified and approved.



## **RISK ACKNOWLEDGMENT, ACCEPTANCE AND RELEASE**

You are going to participate in activities where risk may be greater than what you normally encounter in your day-to-day routine. For your own personal safety as well as being a participant in the Navigating Transitions Project offered by the Alaska Humanities Forum, you need to plan ahead of time in order to make your experience safe. During your orientation sessions the staff, contractors of the Alaska Humanities Forum and guest speakers will discuss with you the basic rules of safety while staying in your host community. Following these instructions, you must exercise common sense and personal awareness to reduce the element of risk and damages to yourself and others. However, it will be impossible for the Alaska Humanities Forum and your host community, host culture camp and/or host family to eliminate all hazards or to guarantee your safety against all risks. You must understand this fact and you must promote personal responsibility for your own safety and the safety of others participating in the program. You must act reasonably, prudently, and exercise common sense and good judgment throughout your experience in the Take Wing Alaska Educator Cross-Cultural Immersion Experience. To emphasize the importance of this, we will require you to read and return the following description and acknowledgment of risks and release.

### **1. Acknowledgment of Risk**

In consideration of the services of the Alaska Humanities Forum, its board of directors, agents, and employees, the University of Alaska Anchorage, Alaska Job Corps, host families, the non-profit corporations of Aleutian-Pribilof Islands Association/Native Village of Sand Point, Camp Qungaayux, Calista Elders Council, Iisagvik College, Kodiak Island Borough School District/Native Village of Afognak, Hydaburg Haida Culture Camp/Hydaburg Cooperative Association, Koyukon Athabaskan Culture Camp/Koyukuk Tribal Council, Organized Village of Kake, Native Village of Hughes, Nuniaq Camp/Native Village of Old Harbor, Native Village of Klukwan, and all other persons associated with the Rose Urban Rural Exchange Program:

I agree that the risks associated with the course are as follows:

Although the Alaska Humanities Forum and its staff have taken reasonable steps to inform me of the appropriate clothing and gear needed to participate in or observe subsistence activities in the villages, such as ice fishing, seal and bird hunting, certain risks are inherent, and cannot be eliminated without destroying the unique character of the activity. These inherent risks can be causes for the loss or damage of my personal belongings, accidental injury, illness, or in extreme cases, permanent trauma or death. The following describes some but not all of those risks.

### **2. Description of Activities and Inherent Risks**

As a participant in the Educator Cross-Cultural Immersion, you will be transported to and from your village and/or culture camp by commercial plane, and in some cases it will be necessary to travel to your host village or culture camp from a neighboring village by all terrain vehicle (ATV), boat or ferry. Upon your arrival in your host village the mode of transportation within the village and surrounding areas may include automobile, ATV, and/or boat or ferry. During your stay in your host village you may participate in or observe a variety of activities, such as traditional Native dancing, Native games, traditional arts and crafts, such as woodworking, sewing and beading, basket making, drum making, fish wheel, canoe and kayak building; the gathering and preparation of traditional foods, fishing, seal hunting, bird hunting, and other physical activities such as kayaking or canoeing.

You may travel outside the village or culture camp on day trips to participate in or observe subsistence activities such as fishing, seal hunting or bird hunting. You may drink water from local water sources; carry your own gear and equipment; and travel across the tundra on an ATV or boat. During the spring and summer months between June through August, the climate may vary greatly according to the eco-regions, which may include the following conditions: there may be rapid water run-offs from the low tundra lands, which may result in deep pools of water on the tundra. These pools run off into the frozen sloughs and rivers, which may create large holes on the ice of the lakes and rivers and create dangerous conditions. In participating in or observing subsistence activities, you may engage in strenuous physical activity for long periods during the day; and possibly be exposed to rain, snow, wet conditions, extremes of cold and inclement weather, standing water, changing ice conditions, a variety of wild animals, open ocean water and any and all other natural hazards, risks and dangers that exist and may occur in a wilderness environment. You may also be in remote areas for hours, away from health clinics or other emergency medical facilities. While you are in the wilderness setting, you may face risks associated with errors and imprecise group and individual perceptions and judgments. The risks of the activities may include but are not limited to drowning, broken bones, sprains, strains, sunburn, windburn, cuts and internal and external injuries with bleeding.

When traveling by boat, you may be in open water and be exposed to waves, tides, and powerful currents and may encounter violent storms and sea mammals. You will also be exposed to risks associated with capsizing or sinking in extremely cold waters, which may expose you to hypothermia or accidental death.

### **3. Acknowledgment of Risks and Release**

I am aware that the activities associated with this trip entail risk of injury or death to any participant. I have read the description of risk activities contained in this statement, and I understand the description of these inherent risks is not complete and that other unknown or unanticipated inherent risks may result in injury or death.

I agree to assume and accept full responsibility for the inherent and unanticipated risks identified herein and those inherent risks not specifically identified. My participation in this activity is purely voluntary, no one is forcing me to participate, and I elect to participate in spite of and with full knowledge of the inherent risks. I acknowledge that engaging in this activity may require a degree of skill and knowledge different than other activities that I have participated in the past. I represent that I am in good shape and have met the criteria for participation in this activity and that I have obtained an appropriate medical release form. I certify that I am fully capable of participating in the activity.

Therefore, I assume and accept full responsibility for myself, for bodily injury, death, or loss of personal property and expenses as a result of those inherent risks and dangers identified herein and those inherent risks and dangers not specifically identified, and as a result of my negligence in participating in this activity. I have carefully read and clearly understand and accept the terms and conditions stated herein and acknowledge that this agreement may be effective and binding upon myself, my heirs, assigns, personal representative and estate, and for all members of my family, including minor children. By entering this Agreement, I release the Alaska Humanities Forum, its employees and board of directors and the Take Wing Alaska program, the host culture camps, host families and members of their families, the Tribal Councils/IRAs and their members, and/or the village city or governing bodies, Job Corps, and the University of Alaska Anchorage from all liability for any loss or injury, of whatever kind or nature, may arise from the risks disclosed and acknowledged in this release.

I agree that if I choose to extend my trip either before or after the official trip dates I choose to do so as an individual and am no longer considered a teacher participant.

\_\_\_\_\_  
Signature of Participant

Dated: \_\_\_\_\_



### Permission for Medical Care and Release of Liability

In consideration of the acceptance and participation of the applicant in the Take Wing Alaska program, the undersigned APPLICANT to the full extent permitted by law, hereby release and agree to save, hold harmless and indemnify, all culture camps, and Native non-profits, Tribal Councils/IRAs and their members, Alaska Humanities Forum board of directors, and employees of the Take Wing Alaska program, the University of Alaska Anchorage, and the Alaska Job Corps from any or all liability for any loss, property damage, personal injury or death, including any such liability which may arise out of the negligence of any such persons or entities, which may suffered or claimed by such applicant, parent or guardian during, or as a result of, the participation by the applicant in such Navigating Transitions Project, including travel to and from the host culture camp.

I understand that the Take Wing Alaska program does not provide medical insurance, which would cover the participant's injuries or actions. It will be my responsibility as to provide payment for such expenses should they occur, including emergency transportation costs. I am aware of the hazards associated with participation in this activity.

I understand that, in the event of an accident or illness, if I should become incapacitated, the Take Wing Alaska program and/or the Culture Camp staff will attempt to notify my designated emergency contact.

In the event of an accident or illness where I am incapacitated and my designated emergency contact cannot be reached, I authorize any employee of the Take Wing Alaska program and/or the Culture Camp staff to **select the appropriate medical facility and physician(s)/dentist(s) to provide treatment;**

- I give permission for any operation, administration of anesthetic or blood transfusion which a medical practitioner may deem necessary or advisable for the treatment;
- I further **consent to any medical or surgical treatment by a licensed physician, surgeon or dentist**, which might be required for any emergency situation.

Designated Emergency Contact Name: \_\_\_\_\_

Business Phone # \_\_\_\_\_ Home Phone# \_\_\_\_\_

Cell Phone # \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

**Participant's Printed Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Dated this** \_\_\_\_\_ **day of** \_\_\_\_\_, **20** \_\_\_\_\_

