



**A Program of the Alaska Humanities Forum**

**Please print in ink.**

Student's First Name	Middle	Last (legal name)	
Permanent Resident Address	City	State	Zip Code
Mailing Address (if different)	City	State	Zip Code
Home Phone	Daytime Message Phone:	E-Mail Address	
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth mm/ dd / yyyy      Age	Name of School	
	/   /	Grade:	
Tell us in a few sentences about any extra curricular activities (sports, academics, etc) you participate in at school or within your community:			
Do you know anyone that has attended any post-secondary school (college, trade school, etc)? Yes___ No___  If Yes Who?			
Why do you want to participate in Take Wing Alaska?			
Attach another sheet if necessary.			

**By signing below I understand Take Wing Alaska is a three (3) year commitment. My son/daughter has my/our permission to apply for and participate in the Take Wing Alaska Project.**

\_\_\_\_\_  
Signature of Student Applicant Date

\_\_\_\_\_  
Signature of Parent/Legal Guardian Date

**STUDENT EMERGENCY INFORMATION  
(IMPORTANT - PLEASE PRINT LEGIBLY)**

PLEASE FILL IN ALL INFORMATION IF THE INFORMATION IS NOT APPLICABLE,  
**PLEASE STATE N/A OR NONE**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Student's First Name      Middle      Last      Birthdate

**CUSTODIAL GUARDIAN/PARENT FULL NAME**

Name \_\_\_\_\_

Home Ph No \_\_\_\_\_ Business Ph No \_\_\_\_\_

Cell Ph No \_\_\_\_\_ E-Mail Address \_\_\_\_\_

**GUARDIAN/PARENT FULL NAME**

\_\_\_\_\_  
Home Ph No \_\_\_\_\_ Business Ph No \_\_\_\_\_

Cell Ph No \_\_\_\_\_ E-Mail Address \_\_\_\_\_

**EMERGENCY CONTACT NAME** (other than parent/guardian)

Name \_\_\_\_\_

Home Ph No \_\_\_\_\_ Business Ph No \_\_\_\_\_

Cell Ph No \_\_\_\_\_ E-Mail Address \_\_\_\_\_

**NAME OF PHYSICIAN**

Physician's Phone Number \_\_\_\_\_

**Please list student's chronic illness, disease, or condition** (asthma, diabetes, etc.)

\_\_\_\_\_

**Student's Prescription Medicines:** \_\_\_\_\_

**List Student's Allergies to:**

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

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

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

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

Do you have Health Coverage/Medical Insurance? \_\_\_\_\_

Do you have Denali Kid Care? No \_\_\_\_\_ Yes \_\_\_\_\_ Denali Kid Care ID# \_\_\_\_\_

Medicaid? No \_\_\_\_\_ Yes \_\_\_\_\_ Medicaid ID# \_\_\_\_\_

Name of Health Insurance \_\_\_\_\_

Name of Insured \_\_\_\_\_

Group/Policy Number \_\_\_\_\_ ID Number \_\_\_\_\_



**MEDIA RELEASE FORM**

Take Wing Alaska  
Alaska Humanities Forum  
421 W. First Avenue, Suite 300  
Anchorage, AK 99501  
(907) 272-5338  
(907) 272-3979 FAX  
[amatthews@akhf.org](mailto:amatthews@akhf.org)

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, or recordings, I hereby consent to the use and editing thereof and release the Alaska Humanities Forum, and 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 \_\_\_\_\_ day of \_\_\_\_\_, year \_\_\_\_\_

\_\_\_\_\_  
(Signature of Person Participating)

Parent or legal guardian signature is required if the participant is under 19 years of age.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

The above consent and release is hereby ratified and approved.

Revised 2/10

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

You may participate in activities where risk may be greater than what you normally encounter in your day-to-day routine. While living and traveling in the city, you may experience problems associated with urban living, including increased crime, pollution, and high population density. For your own personal safety and well being as a participant in Take Wing Alaska offered by the Alaska Humanities Forum you need to plan ahead to make your experience is safe. During the pre-travel session the staff from Take Wing Alaska and its contractor(s) or subcontractors 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 injury to yourself and others. However, it will be impossible for the Alaska Humanities Forum and your host community to eliminate all hazards or to guarantee your safety against all risks. You must take personal responsibility for your own safety and the safety of others participating in the program. Act reasonably, prudently, and exercise common sense and good judgment throughout your experience with Take Wing Alaska. **To emphasize the importance of this, you and your parents, or legal guardian must read and return the following acknowledgment of risks and release.**

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

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

Although the Alaska Humanities Forum, its contractor(s) or subcontractors and its staff and program representatives have taken reasonable steps to inform me that the activities offered through Take Wing Alaska include risks, including risks which are inherent and cannot be eliminated without destroying their unique character. 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 Take Wing Alaska, you will be transported to and from your village by commercial plane. Upon your arrival in your host community, the mode of transportation within the community and surrounding areas may include automobile, school bus and/or public transportation, over improved or unimproved roads, and by train, ATV, and/or boat or ferry. During your stay in your host community you may participate in, observe or be exposed to a variety of activities, indoor and outdoor, such as: swimming, in-line skating, ice skating, skateboarding, horseback riding, bicycling on and off roads, trails and highways, getting lost, traffic, being involved in a vehicular accident, and exposure to natural disasters such as earthquakes, tsunamis or forest fires.

You may travel outside your host community on day trips to participate in or observe various activities such as: shopping, hiking, backpacking, site seeing, boating, kayaking, skiing, tubing, canoeing, or extra curricular school activities, such as attending sporting events. The following are some, but not all, of the inherent risks which may be encountered: animal encounters, risks of cold or heat injury, insect or other animal bite, and losing balance on wet, frozen or uneven surfaces. The risks of the activities may include but are not limited to drowning, fractures or broken bones, torn muscles and/or ligaments, 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 may 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 acknowledge that Take Wing Alaska recommends that I never travel alone. Going out on your own, especially at night, may present additional danger to my safety and well-being. 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, 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 from 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 signed the medical release form. I certify that I am fully capable of participating in the activities.

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, and its employees, board of directors, contractors, the University of Alaska Anchorage, and Alaska Job Corps from all liability for any loss or injury, of whatever kind or nature, may arise from the risks disclosed and acknowledged in this release.

---

Printed Name of Student  
Date

Signature of Student

---

Printed Name of Parent or Guardian  
Date

Signature of Parent or Guardian

---

Printed Name of Parent or Guardian  
Date

Signature of Parent or Guardian