

## **AMAZING GRACE SAFARI AND SERVICE TRIP TO KENYA 2018 TERMS AND AGREEMENTS**

The Amazing Grace Safari and Service Trip 2018 to Kenya, September, 2018, (“The Activity”) is being made available by Amazing Grace Spiritual Center (AGSC) (“The Sponsor”), a recognized 501(c)(3) religious non-profit, for individuals interested in traveling and serving in Kenya. The Activity may be cancelled or modified due to circumstances beyond The Sponsor’s control (conflict, weather, airline or vendor cancellations, etc.).

### **WE STRONGLY RECOMMEND THAT YOU FOLLOW YOUR PREFERRED HEALTH PROVIDER’S IMMUNIZATION RECOMMENDATIONS.**

We ask that you consider and agree to the following before making a deposit for the trip:

1. I am eighteen (18) years of age or older (16 years accompanied by guardian).
2. I am physically able to complete this travel.
3. I recognize that The Sponsors are NOT “sellers of travel” as defined in RCW 19.138.021(6).
4. I realize that The Sponsors are arranging travel directly through vendors in Kenya and will pay to the Vendors necessary deposits from the funds I pay to AGSC. The deposits might not be refundable in case of a cancellation no matter the circumstances.
5. I recognize that circumstances beyond the control of The Sponsors, such as an act of terrorism or the U.S. State Department canceling all American flights to or from Kenya, might require a postponement or cancellation of The Activity.
6. I agree to hold The Sponsors harmless if The Activity is cancelled for reasons outside their control. Although I know that The Sponsors will do everything in their power to obtain refunds on my behalf, I will not hold them liable for any refunds not received.
7. I know that, if The Sponsors cancel The Activity for their own convenience, I will be due a full refund.
8. There is a minimum \$1500.00 cancellation fee if I cancel at ANY TIME after making my registration (\$500 contribution for school tax deductible/\$1000 travel not tax deductible).
9. If I cancel my trip after May15, 2018, I understand that I will be charged an additional cancellation fee of \$1000.00 (\$500 contribution for school tax deductible/\$500 travel not tax deductible). If I cancel after July 1, 2018, I understand that I will not be entitled to any refund.
10. I agree that The Sponsors shall not be obligated to refund any cancellation penalties imposed by the vendor with whom the services were arranged.
11. I understand and agree to the refund policy in total.
12. I understand that international travel can be fluid and changes may occur during The Activity. I recognize and agree that flexibility on my part is a necessity and will do my best to “go with the flow.”
13. I recognize that this is a packaged voluntourism experience, and that expenses for tour leader(s) and administrative costs are factored into the price structure.

Name (printed) \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Signature

**Amazing Grace Spiritual Center      2007 NW 61st Street, Seattle WA 98107**



**AMAZING GRACE SAFARI AND SERVICE TRIP TO KENYA 2018  
PERSONAL INFORMATION SHEET**

(Please PRINT legibly)

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_\_

Phone: Cell (\_\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Single occupancy or Double occupancy (circle one)

Passport number \_\_\_\_\_

Name exactly as on passport \_\_\_\_\_

Issue date \_\_\_\_/\_\_\_\_/\_\_\_\_      Expiration date \_\_\_\_/\_\_\_\_/\_\_\_\_

(Must be valid 6 months after end of trip) Please provide color copy of passport for visa

Roommate request (if possible) \_\_\_\_\_

Airline seat request (if possible) A W M (circle one)

Dietary requests (if possible) \_\_\_\_\_

Alaska Air Frequent flyer number (or specify other) and issuer  
\_\_\_\_\_

I have previously traveled internationally yes no (circle one)

Any physical constraints \_\_\_\_\_

Community or Organization \_\_\_ Amazing Grace Other \_\_\_\_\_

Primary interest on trip \_\_\_\_\_

Travel Insurance \_\_\_\_\_ contact information

T Shirt size \_\_\_\_\_

**INTERNAL USE**

1st deposit \$ \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Rec'd by \_\_\_\_\_

2nd deposit \$ \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Rec'd by \_\_\_\_\_

3rd deposit \$ \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Rec'd by \_\_\_\_\_

4th deposit \$ \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Rec'd by \_\_\_\_\_



**AMAZING GRACE SAFARI AND SERVICE TRIP TO KENYA 2018  
WAIVER, RELEASE AND HOLD HARMLESS AGREEMENT**

In consideration of Amazing Grace Spiritual Center (“The Sponsor”) allowing me to participate in the Amazing Grace Safari and Service Trip 2018 to Kenya, (the "Activity"), which will occur between September 12, 2018, and September 27, 2018, I (together with my parent or guardian, if I am under the age of eighteen [18] or under a legal disability) represent, covenant and agree, on behalf of myself and my heirs, assigns, and any other person claiming by, under or through me, as follows:

1. I acknowledge that participating in the Activity involves certain risks (some of which I may not fully appreciate) and that injuries, death, property damage or other harm could occur to me or others. I accept and voluntarily incur all risks of any injuries, damages, or harm which arise during or result from my participation in the Activity, including any associated travel, regardless of whether or not caused in whole or in part by the negligence or other fault of Amazing Grace, its directors, officers, employees, agents, volunteers, trustees, affiliates and/or insurers ("Released Parties").
2. I waive all claims against any of the Released Parties for any injuries, damages, losses or claims, whether known and unknown, which arise during or result from my participation in the Activity, regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties. I release and forever discharge the Released Parties from all such claims.
3. I agree to indemnify and hold the Released Parties harmless from all losses, liabilities, damages, costs or expenses (including but not limited to reasonable attorneys’ fees and other litigation costs and expenses) incurred by any of the Released Parties as a result of any claims or suits that I (or anyone claiming by, under or through me) may bring against any of the Released Parties to recover any losses, liabilities, costs, damages, or expenses which arise during or result from my participation in the Activity, regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties.
4. I have carefully read and reviewed this Waiver, Release and Hold Harmless Agreement. I understand it fully and I execute it voluntarily.

EXECUTED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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

\_\_\_\_\_  
Participant Printed Name

\_\_\_\_\_  
Parent/Guardian Signature  
(required if participant is under the age of  
18 or disabled)

\_\_\_\_\_  
Parent Printed Name

\_\_\_\_\_  
Parent/Guardian Printed Name

**Sponsor: Amazing Grace Spiritual Center      2007 NW 61<sup>st</sup> Street, Seattle WA 98107**



**AMAZING GRACE SAFARI AND SERVICE TRIP TO KENYA 2018  
CONSENT TO TREAT**

This authorization extends to the entire period of the Amazing Grace Safari and Service Trip 2018 to Kenya, September 12 - 27, 2018, ("The Activity"), from departure from Seattle to arrival in Seattle, including any unforeseen extensions of the travel period.

I certify that I, [print name] \_\_\_\_\_, hereby authorize on-site travel coordinators for The Activity, the trip's designated medical representatives (if any), or, in the event they are not present, other participants in The Activity to obtain medical care for me if I am unable to do so myself. This care can include treatment by a physician, nurse, or clinic, and can include necessary emergency and surgical care and/or hospitalization.

I understand that the coordinators, medical representatives (if any), and fellow trip participants are under no obligation relating to my medical care and are not responsible for ensuring the presence of any medical professionals on the trip. In the event that any of these individuals administers or authorizes emergency medical care to me, I hereby release such individual(s) from any and all liability with respect to such emergency medical care.

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

Participant Name Printed: \_\_\_\_\_

**EMERGENCY CONTACT**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**MEDICAL HISTORY, CONDITIONS, AND MEDICATIONS**

Please describe below any medical conditions and any medications you are currently taking:

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*AMAZING GRACE SAFARI AND SERVICE TRIP TO KENYA 2018*

*SACRED COVENANT*

*"I slept and dreamt that life was joy. I awoke and saw that life was service. I acted and behold, service was joy." Rabindranath Tagore*

*"Oneness is the source of love. Real Love is the One celebrating itself as the many." Ram Dass*

*Purpose: LOVE (awareness of my oneness with all life)*

*Vision: Demonstrating Love in Action Globally!*

*Intentions:*

- 1. To be of sacred service to the Kenyan people.*
- 2. To experience an international adventure through conscious travel.*
- 3. To create an atmosphere of Joy and Love wherever we are, every day.*
- 4. To deepen in connection with myself, Spirit, my community, our global family/the world.*
- 5. To be awake and aware and pay attention to my personal safety and that of others and those we serve.*
- 6. For myself, to \_\_\_\_\_*
- 7. For others, to \_\_\_\_\_*

*Our agreements are:*

- 1. I serve in the joy of community.*
- 2. I commit to daily spiritual practice.*
- 3. I practice mindful and respectful communication with others.*
- 4. I am a loving ambassador of our spiritual centers.*
- 5. I honor our "No complaining, be flexible!" pact.*
- 6. I commit to honor all my financial and trip-related requirements in a timely manner.*

\_\_\_\_\_  
*Name (printed) Date*

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