“Activity”: 20th GLOBE Annual Partner Meeting and Student Program, Estes Park, Colorado

Date(s): 17 – 22 July 2016

Participant desires to participate in or observe the Activity (described above), which has been organized by the following released parties: The University Corporation for Atmospheric Research, and its related companies, subsidiaries, divisions, affiliates, officers, directors, employees, agents, and representatives (hereinafter jointly and severally referred to as the “Released Parties”).

Participant acknowledges that the Released Parties are not responsible for supervising the Activity or otherwise ensuring the safety of the Activity.

Participant's participation in the Activity is completely voluntary and Participant understands that he/she will be involved in an Activity that may involve substantial and serious risks and danger of bodily injury, including, without limitation, permanent disability, paralysis, death, and/or property damage. Such risks and dangers may be caused by, among other factors, action or inaction of Participant, condition of Participant, the condition of the premises on which the Activity occurs, the condition of any equipment used in the Activity, the negligence of the provider or supervisor of the Activity or the negligence of other participants and/or the Released Parties. Participant fully accepts and assumes all risks and responsibilities for losses, costs, and damages incurred in participation in any part of the Activity.

Participant, on behalf of himself, his spouse, children, family members, agents, and representatives completely and unconditionally RELEASES, FOREVER DISCHARGES, COVENANTS NOT TO SUE, AND AGREES TO INDEMNIFY AND HOLD HARMLESS the Released Parties from all liabilities, claims, demands, losses, and damages, including attorneys’ fees and costs, arising, directly or indirectly, out of the Activity and Participant’s participation in the Activity, whether or not caused or alleged to be caused in whole or in part by the negligence of any of the Released Parties, or otherwise, and whether such losses or damages can be anticipated or not and including any damages, attorneys fees or costs incurred to enforce this Agreement.

This Agreement shall be governed by the laws of the United States and the State of Colorado. Courts located in the State of Colorado shall have exclusive jurisdiction over any matters related to this Release. If for any reason a court of competent jurisdiction finds any provision, or portion thereof, to be unenforceable, the remainder of this Agreement shall continue in full force and effect.

I am age eighteen or older. (If not, a parent or legal guardian must sign below.) I have read and fully understand the terms of the Activity Release on this document, and I accept its terms.

<table>
<thead>
<tr>
<th>Participant’s Name &amp; Signature</th>
<th>Parent or Guardian’s Name &amp; Signature (if Participant is under 18)</th>
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IMAGE CONSENT AGREEMENT

Activity and/or Project: 20th GLOBE Annual Partner Meeting and Student Program, Estes Park, Colorado

Date(s): 17 – 22 July 2016

I agree that the University Corporation for Atmospheric Research (“UCAR”) may take photographs or create footage of my participation in the above-referenced activity/project.

I agree that the photographs and footage may be used by UCAR, its sponsors and collaborators for non-commercial, non-profit research, illustration and educational purposes, and

I give my permission to be identified in such photographs and footage.

I am age eighteen or older. (If not, a parent or legal guardian must sign below.) I have read and fully understand the terms of this Image Consent, and I accept its terms.

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20th GLOBE Annual Partner Meeting and Student Program Behavior Policy 2016

For the safety and well being of all students participating in the 20th GLOBE Annual Partner Meeting and Student Program there are specific guidelines and expectations for all the students from each delegation. Please read and certify that you intend to be in compliance with these behavior rules.

- All participants must obey applicable laws.
- All participants are expected to be respectful of each other at all times and honor all directives and requests from sponsors and 20th GLOBE Annual Partner Meeting staff, teachers and chaperones.
- All participants are expected to attend each program function and activities related to the 20th GLOBE Annual Partner Meeting and Student Program.
- There will be zero tolerance for alcohol consumption, smoking, or the use of any illegal drugs.
- There will be a curfew each night, random bed checks, and lock-down procedures in place at all times. Chaperones and students are expected to be together in the hotel at this time.

I agree to meet these expectations of the 20th GLOBE Annual Partner Meeting Host and Sponsors. I understand that compliance is required for my own safety and security and the safety and security of others. Further, I understand and acknowledge that if I fail to comply with these rules, I may be required by The GLOBE Program (at their sole discretion) to return home immediately, at my sole expense. If I am a student, I will be escorted home by my teacher/chaperone or another adult approved by the 20th GLOBE Annual Partner Meeting authorities, at my sole expense.

<table>
<thead>
<tr>
<th>Student’s Name &amp; Signature</th>
<th>Teacher/Chaperone Name &amp; Signature</th>
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<td>Clearly Print Name:</td>
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The signature of a parent is required. If sent home by the 20th GLOBE Annual Partner Meeting Host or Sponsors, I agree to reimburse whomever immediately upon receipt if invoice, for all costs and expenses incurred in returning my child, including all costs and expenses (travel expenses to my home and from my home back to the conference) of his or her escort.

<table>
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<tr>
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YMCA of the Rockies Estes Park Center Adventure Activities

Acknowledgment of Risk/
Waiver of Liability Agreement

There are risks involved in these activities. It is your choice whether you participate in one or more of these activities and to what level you participate. Our philosophy is “Challenge by Choice” which means you select the degree of challenge (if any) to which you will be exposed. However, in order for you to participate at any level in any of these activities, you or if your are less than 18 years of age, your parent or legal guardian, must read and sign this document.

Acknowledgement of Risks and Hazards

I acknowledge that there are risks and hazards involved in the Adventure Activities in which I have chosen to participate. These risks include but are not limited to:

1. Physical injury
2. Trauma
3. Death
4. Emotional injury
5. Property damage

These hazards include but are not limited to:

1. All manner of injury resulting in falling and hitting rock faces, trees or projections, whether permanently or temporarily in place, or the ground
2. Injuries resulting from falling climbers or dropped items, such as but not limited to, ropes or climbing hardware
3. Failure of rope, slings, harnesses, climbing hardware, anchor points, or any part of the Adventure Activities
4. Rope abrasion, entanglement and other injuries related to but not limited to, climbing, belaying, lowering on rope, rescue systems, and any other rope techniques
5. Exposure to the sun and cold or severe weather conditions
6. Uneven or unexpected road, trail or ground surfaces
7. Contact with animals or insects
8. Interference from other activities in the vicinity
9. The physical and mental effects of rigorous physical activity at high altitude (8000 feet above sea level)

I acknowledge that this is not an exhaustive list of the risks or hazards that I may encounter, and that I may encounter unforeseen situations.

Certification of Fitness

I certify that I am healthy (both physically and emotionally) and capable of participating in this activity or these activities. I have listed below any medical condition(s) that the YMCA should be aware of which may hinder my participation in the activity selected. However, I understand that it is solely my responsibility to determine whether there is any medical reason that I should not participate in the selected activity.

DO YOU HAVE ANY MEDICAL CONDITION(S) THAT WE SHOULD BE AWARE OF THAT MAY HINDER YOUR PARTICIPATION?

NO _____ YES _____

If yes, please explain:

Waiver of Liability

1. In order to participate in the activity or activities listed above, I forever waive my right to sue YMCA of the Rockies (including its directors, staff, employees and other contracted parties) for any injury (including death) that I may suffer arising out of my participation in this activity or these activities. I understand that by signing this document, I release the YMCA (including its directors, staff, employees and other contracted parties) from all liability for any injuries (including death) that I may suffer because of my participation in the activity or activities listed above.

2. In the event that I file a lawsuit against YMCA of the Rockies, Estes Park Center, I agree to do so solely in the state of Colorado, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portion shall remain in full force and effect.

3. Should it become necessary for the YMCA Estes Park Center or someone on the Estes Park Center’s behalf to incur attorney’s fees and costs to enforce this agreement, I agree to pay YMCA Estes Park Center reasonable costs and attorney’s fees.

I, the undersigned, have read, understand and accept the terms of this Acknowledgement of Risk/Waiver of Liability Agreement. I further understand that the terms of this agreement are legally binding. I certify that I have read this agreement and am signing this agreement of my own free will.

Name of Participant (Please Print) ____________________________ Age ______

Date(s) of Participation ____________________________ Date of Birth ______

Address ____________________________________________ City __________ State ______ Zip ______

Home Phone ( ) __________ Work Phone ( ) __________

In case of emergency, contact: Name ____________________________ Phone ( ) __________

IF UNDER 18 YEARS OF AGE, A PARENT OR GUARDIAN MUST READ AND SIGN BELOW: I am the legal guardian of the above minor and have read the above RELEASE. I hereby consent to the terms of the RELEASE on behalf of the named minor, and give my consent to the participation of the above named minor in all adventure activities of the YMCA of the Rockies on the terms stated.

SIGNATURE OF PARTICIPANT: ____________________________ Date of Signature: ____________

Or if the participant is a minor (less than 18 years of age), I represent that I have legal authority to execute this waiver on behalf of the participant.

SIGNATURE OF GUARDIAN: ____________________________ Date of Signature: ____________
Assumption of Risk Agreement

Participant Name _________________________________________________________________

In consideration of being allowed to participate in any way in the GLOBE 2016 Student Expedition lead by
Estes Park Environmental Center, I the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant.
2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the
   negligence of the releasees or others, and assume full responsibility for my participation.
3. I willingly agree to comply with terms and conditions for participation. If I observe any unusual
   significant hazard during my presence or participation, I will remove myself from participation and
   bring such to the attention of the nearest official immediately.
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby
   release, indemnify and hold harmless the Estes Park Environmental Center, its officers, officials
   agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and
   lessors of premises used to conduct the event (releasees), from any and all claims, demands, losses,
   and liability arising out of or related to any injury, disability or death I may suffer, or loss or damage
   to person or property, whether arising from the negligence of the releasees or otherwise, to the
   fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY
UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT,
AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT

X___________________________________________________________      ____________        _______________
Participant’s Signature      Age                Date

FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE
(Under age 18 at time of registration)
This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and
agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and
next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liability
incidents to my minor child’s involvement or participation in these programs as provided above, even if
arising from the negligence of the releasees, to the fullest extent permitted by law.

X_____________________________________________________      ___________           _______________________________
Parent/Guardian Signature     Age                      Emergency Phone Number