

# **WILLIAMS GEOADVENTURES**

## **SCOTLAND ROCKS! 2012**

### **GENERAL CONDITIONS**

Reservations are on a first come basis and limited to 20. Land cost is \$3,800. Airfare from San Francisco to Edinburgh is currently about \$900 round trip. You must book your flight to and from Edinburgh.

#### What to Expect:

An exceptional exploration of the geology and landscapes in Northern Scotland. Day trips will study fundamental concepts that were important in the development of geology as a science. In the Edinburgh area, participants will gain first-hand experience in relative dating principles and interpreting geologic history. In the Highlands, we will study geologic processes, structural geology, and landscape development, expanding on the tools we learned in Edinburgh. Daily hikes range in length from one-half to three miles. On some days, we will take two or three short hikes. The trip is designed for the adult learner with an interest in earth science but with no formal geologic course work or training.

#### Fee Includes:

Land transport by private coach, accommodations in Edinburgh, Inverness, Ullapool, and the Isle of Skye, in twin share or double room with bath in 3-star hotels. Meals include a full breakfast, along with welcoming and farewell dinners in Edinburgh and the first dinner at our hotels in Inverness, Ullapool, and Skye, for a total of five dinners. Also includes, railway in Cairngorms National Park, boat trip on Skye, public transportation in Edinburgh for the first two days, entrance fees, leadership, administration.

#### Fee Does Not Include:

International airfare, seven dinners and all lunches, personal items such as alcoholic beverages, laundry, phone calls, sodas, bottled water, snacks, cost of hospital and evacuation, personal insurance, or foreign airport taxes.

### Single Accommodations:

Single accommodations are available at an additional cost of approximately \$800. According to Rabbits Tours, the tour provider, single accommodation costs can vary greatly depending on the number of single rooms required. Most Highland hotels only have two or three single rooms, so if more are required, it is necessary to arrange double rooms for single occupancy. Rabbits Tours hopes to reduce the cost of the single accommodations once the number of single rooms required is known.

### Reservations, Deposits, and Payment:

Please mail a nonrefundable deposit of \$800 per person payable to Williams GeoAdventures with the completed reservation form. The balance of \$3,000 is due on April 1.

### Cancellations and Refunds:

There are no refunds for unused meals, accommodations, or other trip features. You may wish to purchase trip cancellation insurance.

### Canceled Trips:

I reserve the right to cancel any trip prior to scheduled departure due to undersubscription or logistical problems (strikes, nuclear war, etc.). I will refund all payments in full. In no event shall my liability exceed the obligation to refund the amount you paid me. Trip cancellation due to undersubscription usually occurs one month before departure.

### Withdrawal:

I reserve the right to require any participant to withdraw from a trip at any time if I deem his or her acts or conduct to be detrimental to or incompatible with the interest, harmony, comfort or welfare of the trip. In such cases no refunds will be given.

### Medical:

Although this trip is not physically demanding, you must be in general good health to participate. It is the participant's responsibility to judge his or her own physical capabilities for these travel activities. Anyone with medical problems or restrictions must make them known to me well in advance of

the trip and should have a personal supply of any special medicine needed.

I have the right to disqualify any member of the group at any time if considered medically necessary. No refunds will be made under such circumstances. I take no responsibility for special arrangements required by passengers physically unable to complete a trip and I assume no liability regarding provision of medical care.

#### Insurance:

I am planning to carry liability insurance for this trip but cannot get a quote until at least three months before the trip. I will notify you if I do not obtain liability coverage due to cost or availability. I recommend you get travelers insurance. DAN (Divers Action Network) 800 446-2671 and Travel Guard (800 826-1300) have combined resources. They have relatively inexpensive coverage and you do not have to be a diver.

<http://www.diversalertnetwork.org/trip/index.asp> Or Travel Assistance 800-368-7878.

#### Smoking:

United Kingdom law forbids smoking in any indoor space.

#### Suppliers of Services:

I am performing a service by taking people on worthwhile geologic trips. However, I am acting independently and I have no business association with any boat owner, resort, hotel, carrier or other services. Any and all claims for inadequate performance or nonperformance of such services may be made against the supplier or those services but shall not be made against me.

#### Liability Form:

You must understand and sign the enclosed liability form. I feel ethically and morally obligated to make you aware of every remote possibility that we could encounter, unlikely as it is.

Thomas R. Williams

Williams GeoAdventures

## SCOTLAND ROCKS! 2012 APPLICATION

Please complete this application and mail it to Williams GeoAdventures, 101 Ross Street, #4, Cotati, CA 94931, along with your \$800 each deposit check.

DEPARTURE DATE AND CITY (if known) \_\_\_\_\_

NAME (as in passport) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Home Phone \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_

ADDRESS \_\_\_\_\_ E\_MAIL \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CITIZENSHIP \_\_\_\_\_ PASSPORT # \_\_\_\_\_

DATE/PLACE OF ISSUE \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name of second person included on this application:

NAME (as in passport) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Home Phone \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_

ADDRESS \_\_\_\_\_ E\_MAIL \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CITIZENSHIP \_\_\_\_\_ PASSPORT # \_\_\_\_\_

DATE/PLACE OF ISSUE \_\_\_\_\_ Expiration Date \_\_\_\_\_

RELATION \_\_\_\_\_

Thank you for taking the time to fill out the following form. It is important information that I need to conduct the trip in a safe and responsible manner. It is strictly confidential.

Person to contact in the event of an emergency:

\_\_\_\_\_ Relation \_\_\_\_\_

Day Phone \_\_\_\_\_ Night Phone \_\_\_\_\_

Please give a brief description of yourself, your skills, and interests.

Reason for coming on the trip.

Describe any medical, emotional, physical limitations.

Smoker - Yes or No.

Describe medications taken regularly.

Describe any allergies.

Name of Personal Physician \_\_\_\_\_ Phone \_\_\_\_\_

Do you have any special dietary needs? e.g. vegetarian.

If you have any questions please contact me Tom Williams 707 953-6979 or [geoteachtw@earthlink.net](mailto:geoteachtw@earthlink.net)

## **PARTICIPANT AGREEMENT, RELEASE, AND ACKNOWLEDGEMENT OF RISK**

In consideration of the services of Williams GeoAdventures, their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "WGA"), I hereby agree to release and discharge WGA, on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that hiking entails known and unanticipated risks which could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

The risks include, among other things: Slipping and falling: falling objects: water hazards: exhaustion: exposure to temperature and weather extremes which could cause: hypothermia, hyperthermia (heat related illnesses), heat exhaustion, sunburn, dehydration: and exposure to potentially dangerous animals. insect bites, and hazardous plant life: equipment failure: and improper lifting or carrying.

2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.

3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless WGA from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity, including any such claims which allege negligent acts or omissions of WGA.

4. Should WGA or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.

5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I have no medical or physical conditions which could interfere with my safety in this activity, or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.

6. In the event that I file a lawsuit against WGA, I agree to do so solely in the state of California, 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.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against WGA on the basis of any claim from which I have released them herein.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

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

Print Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_ Date \_\_\_\_\_

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

Print Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_ Date \_\_\_\_\_

PARENTS OR GUARDIAN'S ADDITIONAL INDEMNIFICATION

(Must be completed for participants under the age of 18)

In consideration of \_\_\_\_\_ (print minor's name) ("Minor")  
being permitted by WGA to participate in its activities and to use its equipment and  
facilities, I further agree to indemnify and hold harmless WGA from any and all claims  
which are brought by, or on behalf of Minor, and which are in any way connected with  
such use or participation by Minor.

Parent or Guardian

Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Sincerely,

Thomas R. Williams  
Williams GeoAdventures  
101 Ross Street, #4  
Cotati, CA 94931  
[geoteachtw@earthlink.net](mailto:geoteachtw@earthlink.net) - email  
[www.geology-adventures.com](http://www.geology-adventures.com) – website  
(707) 953-6979 - phone