

MARMARTH RESEARCH FOUNDATION

IN THE HELL CREEK FORMATION OF NORTH DAKOTA

Please return this reservation form to
Louis Tremblay, 91 Rosewood Rd., Avon, CT 06001.
 Include a nonrefundable deposit of \$100 per person per week,
 made out to “**Marmarth Research Foundation,**” a copy of your
 insurance card, and the signed Participant Agreement form.
Balance of full payment is due by June 1, 2017.
 Please mark your calendar. Any questions please e-mail Lou at
lou@dinolou.com or call (860) 674-9121.



LAST NAME _____ TITLE* _____

FIRST NAME _____ MIDDLE INITIAL _____

ADDRESS _____

CITY _____ STATE _____

HOME PHONE _____ EMAIL _____

WORK PHONE _____ DATE OF BIRTH _____

PARTICIPATION STATUS _____ * Please indicate Mr., Mrs., Miss, Ms., Dr., etc.

- Adult new participant*
- Teacher new participant*
- Student new participant*
- Past participant*

PROFESSIONAL OR EDUCATIONAL BACKGROUND

TRAVEL PLANS

- Flying to Rapid City and need round trip shuttle to Marmarth (\$60 fee). Please note that your flight must arrive in Rapid City by 4:30 p.m. and depart Rapid City no earlier than 11:30 a.m.*
- Driving to Marmarth*

2017 DATES Please note that all arrivals and departures are on Saturday

July 1 – July 8 *July 15 – July 22*

July 8 – July 15 *July 22 – July 29*

STARTING DATE OF DIG SESSION (1ST CHOICE) _____

STARTING DATE (2ND CHOICE) _____

LENGTH OF STAY (IN NUMBER OF WEEKS) _____

T-SHIRT SIZE _____

PARTICIPANT RESPONSIBILITIES AGREEMENT

1. I understand that the program fee includes all the tools needed to recover fossils. I understand that I am participating in a real scientific paleontological field operation. I understand that the registration fee does not provide any type of medical or liability insurance to cover injuries. I agree to carry my own liability and medical insurance. I agree to carry auto insurance if driving my own vehicle. Proof of insurance must be submitted with my application and deposit.
2. I understand that conditions in the field may at times be hazardous and that some of the following situations may exist or be encountered while in the field:
 - a. Weather may be extremely hot with strong sun. There is no shade available so I need to protect myself with a hat and sun block.
 - b. Weather may be cold and windy requiring warm clothing.
 - c. Some work may be on steep slopes where there is a risk of slipping or falling.
 - d. The field work may at times be strenuous and difficult, but physical limitations will be taken into account.
 - e. Rattlesnakes and other types of hostile wildlife may be encountered.
3. I understand that the fee deposit is nonrefundable.
4. I understand that the fee does not include transportation to Marmarth from my home.
5. I understand that I am responsible for bringing my own gear such as first aid kits, canteen or water bottle, proper clothing and footwear for hiking and excavation work.
6. I understand that no collecting of fossil material from the field will be allowed without express permission of the leadership.
7. As a parent or guardian of any student on this trip I will be required at all times to supervise the student.
8. I understand that this dig is a serious scientific enterprise. As such I agree that locations, scientific information, and other data gathered is proprietary information of the Marmarth Research Foundation. I will not disclose any information pertaining to the sites without the written permission of the dig leadership and owner of the land on which we will be operating. I agree not to write any articles or publish in any form (paper or electronic) without written permission and final approval of the dig leadership before publication.
9. I agree to not utilize any information for monetary gain and distribution without first obtaining permission from Marmarth Research Foundation.
10. I agree and understand all the terms outlined above. By signing below I hereby accept these terms for both myself and family members who will be attending with me, and I will not hold the leadership or Marmarth Research Foundation or landowners liable for any injuries that I (or my family members) may incur as a result of participation in this field expedition.

PRINTED NAME _____

SIGNED _____

DATE _____