



STUDENT REGISTRATION AND TUITION AGREEMENT

THIS STUDENT REGISTRATION AND TUITION AGREEMENT (this “Agreement”) is entered into between Ecothropic, LLC, a Colorado company (“Ecothropic”) and _____ (“Student”).

To register in the Ecothropic program, the Student must return a signed copy of this Agreement and pay the \$1000 deposit within 14 calendar days of acceptance to the program (unless otherwise agreed upon by Ecothropic). All Appendices must be completed and received by April 1, 2017. Please email a signed and scanned copy to fieldstudies@ecothropic.com.

Appendix A = Student Policies

Appendix B = Participant Release and Indemnity Agreement

Appendix C = Medical Profile

Appendix D = Consent For Medical Treatment

Appendix E = Immunizations & Malaria Prophylaxis

Appendix F = Domestic Airline Information

Appendix G = Certification Form for People-to-People Travel

Appendix H = Release of Liability for Cuba Programs

I/We hereby enroll the above Student in the Ecothropic program **Cuba: Taking on Climate Change** taking place May 13-20, 2017 (“**Program**”) under the following agreed terms and conditions:

1. Program Selection. Student chooses to participate as a student in Program. Given a morning departure time on January 7, student may choose to arrive to the U.S. departure city on May 12, 2017 and depart on May 21, 2017. The Student is responsible for any additional costs incurred and/or arrangements for transportation, accommodation, meals, etc.

2. Program Eligibility. Ecothropic Programs are not right for all students. To that end, Student acknowledges having the physical health, mental health, medication, and overall ability to successfully complete the program.

3. Nonrefundable Deposit. In consideration of Ecothropic holding a place for Student in the Program, Student and Parent(s) shall pay a non-refundable Deposit in the sum of \$1,000.00 when a signed copy of this Agreement is delivered to Ecothropic. This deposit must be received within 14 calendar days of Ecothropic accepting the Student’s application for enrollment in the Program (unless otherwise agreed upon by Ecothropic).

5. Nonrefundable Tuition Deadline. Students and Parent(s) agree to pay full tuition costs of **\$3960 USD** in full on or before **April 1, 2017** via Paypal to fieldstudies@ecothropic.com or by check or money order (please contact Britt Basel at brittbasel@ecothropic.com for payment instructions if you would like to pay by check or money order) and in accordance with the applicable payment structure in Section 6. Tuition cost includes the \$50 application fee and \$1000 deposit resulting in a balance of **\$2910 USD** to be paid by the specified deadline. Tuition cost includes accommodation, meals, in-country transportation, specified activities (including guest lecturers, site visits, and guest lecturers), instruction, Cuban travel visa, basic iNext travel insurance, and Cuban health insurance. Not included: Fee for PSU college credit (\$500), airfare, or additional food, drinks, and activities not included in the itinerary. Student and Parent(s) understand and agree that all tuition for the Program is non-refundable for any reason, including but not limited to, voluntary early departure, physical or mental illness or injury, family emergencies, and removal of Student from the Program per Section 7. Student and Parent(s) further understand and agree that they remain jointly and severally



responsible for payment of any tuition balance even if Student is removed from or voluntarily departs from the Program.

6. Payments. Payments may be made in increments if the complete tuition amount is received by the deadline. In the event that full payment is not received Ecothropic by the specified deadline, Ecothropic shall have the right to remove Student from the program and the deposit shall be forfeit pursuant to Section 7.

7. Passport. Student agrees to have a passport that is valid for six months after the end of the program to satisfy entry/exit requirements. Valid passport information must be supplied to Ecothropic no later than April 1, 2017 in order for Ecothropic to begin the visa process. For more information regarding passports go to www.travel.state.gov. Please notify Ecothropic immediately if you will be traveling under a non-U.S. passport or if you are of Cuban descent. Please make sure to bring at least 2 copies of your passport, a photo of your passport on your smartphone (if you are bringing one), and 2 extra passport photos.

8. Removal; Additional Costs for Removal or Voluntary Early Departure. Ecothropic reserves the right to remove Student from the Program under the following circumstances:

- a. Nonpayment of tuition with the deadline set forth in Section 6.
- b. Upon the sole and exclusive determination by Ecothropic that Student presents a safety concern or medical risk to Student or others, is disruptive, or acts in any manner detrimental to the Program, including a violation of any of the Ecothropic Policies, attached as Appendix A to this Agreement. If Student is removed or voluntarily departs for any reason, none of the tuition is refundable. In addition Student and Parent(s) will be responsible for all additional costs of removal or voluntary departure. Additional costs may include return transportation for the Student and, if necessary, for any escort who accompanies Student if Student is unable to travel independently due to any reason including, but not limited to, physical or mental illness or injury. Student and Parent(s) understand and agree that Ecothropic staff cannot leave a Program to accompany Student and that it is the Student and Parent(s) sole responsibility to arrange for an escort to accompany Student if needed.

8. Transportation; International and Domestic Airfare.

- a. Ecothropic will arrange international flights to and from a US-based international airport, the cost of which is NOT included in the Tuition. Absent emergencies or other unforeseen circumstances, Ecothropic will provide Student and Parent(s) with international itinerary information no less than thirty (30) days prior to the Program start date.
- b. Student and Parent(s) are responsible for arranging and paying for any domestic flights within the United States to ensure that Student arrives at the appropriate departure airport in time to depart with the other participants. **Student must provide Ecothropic with Student's domestic itinerary by completing and returning the Domestic Airline Information document**, attached as Appendix F, and emailing the itinerary to fieldstudies@ecothropic.com. In the event that Student misses the international flight, Student and Parent(s) acknowledge responsibility for making alternate flight arrangements, in consultation with Ecothropic, to ensure that Student is able to join the group as soon as possible.
- c. If Student will be under the age of 18 at the time Student returns from the Program (including early returns due to illness, family emergency, or removal from the Program), Parent(s) acknowledge and consent to Student traveling unaccompanied by an adult on the return flight.

9. Participant Release and Indemnity. Ecothropic works hard to provide a safe environment for all Students and staff participating in Programs. Specific risk management measures include the following:

- Ecothropic staff is trained in safety, risk management, and first aid techniques, and has developed skills related to group dynamics, leadership, and mentorship.
- Program Directors study updates from the Overseas Security Advisory Council, the US State Department, news sources, and are in dialogue with in-country contacts to monitor and assess risks, and will make changes to the itinerary if deemed necessary.
- Program Directors conduct semi-annual safety reviews of every country where Ecothropic conducts a program to assess risk and evaluate continued presence.



- All students undergo an orientation in-country with their Ecothropic instructor(s) to learn about risk management practices, safety, cultural awareness, how to respond to an emergency, and general team building.
- Ecothropic abides by the best practices in international experiential education and partners with one of the first organizations accredited by the US Justice Department, the American Gap Association, which is the approved standards-setting organization.

Despite such precautions, however, certain risks are inherent in the Program and cannot be eliminated. As such, Ecothropic cannot be responsible for preventing all risks to Student. Student and Parent(s) understand the risks associated with the Program and agree to sign the Participant Release and Indemnity Agreement, a copy of which is attached as Appendix C and the Release of Liability for Cuba Programs as Appendix H.

10. Medical Profile. Student and Parent(s) must accurately complete and sign the required Medical Profile attached as Appendix D. Failure to disclose any medical issue that is asked about will limit Ecothropic's ability to provide the best learning and most reasonably safe environment possible and will be grounds for removal at Ecothropic's sole discretion.

11. Immunizations; Health Insurance. Ecothropic recommends that each Student consult with a qualified medical practitioner and the Centers for Disease Control regarding appropriate immunizations and malaria prophylaxis (if applicable). Student and Parent(s) agree to complete and sign the Immunizations document attached as Appendix E.

a. Ecothropic provides Cuban Medical Insurance and U.S.-based basic travel insurance to ensure uniform medical protocols. If Student has specific health insurance needs beyond the provided coverage, Ecothropic may require that Student obtain additional coverage prior to Program Start. Students have the option to upgrade the provided insurance, at their own cost, directly through the insurance provider.

b. Students who are non-US residents are ineligible for the provided travel insurance and will be required to obtain travel insurance on their own.

c. Ecothropic recommends that students increase the provided iNext travel insurance coverage, at their own cost, to meet their personal needs.

12. Copyright Permission. Student and Parent(s) hereby authorize and give full consent to Ecothropic to publish and copyright all photos and videos in which the Student appears and were taken while enrolled as a Student in the Program; this may include newspaper or magazine ads, internet webpages, etc.

13. Dispute Resolution. In the event of any dispute arising out of or relating to the enforcement or interpretation of this Agreement, Student, Parent(s), and Ecothropic agree to first engage in good faith mediation using a neutral third party mediator. If the parties cannot agree upon a mediator, then each party to the dispute shall select a mediator and the mediators so selected shall confer and appoint a separate mediator to facilitate the dispute mediation. The mediator shall prepare a written summary with the essential terms of any resolution agreed to by the parties, which written summary shall be signed by all parties prior to leaving the mediation. The parties shall share equally the cost of the mediation, including any fees payable to the mediator. If the dispute cannot be resolved through mediation, the parties shall submit any and all remaining disputes between or among them to binding arbitration using a single arbitrator in the State of Colorado. The arbitration award may be confirmed in any court of competent jurisdiction. The parties shall share equally the cost of the arbitration, including any fees payable to the provider of arbitration services, and to the arbitrator.

14. Attorney Fees. In any mediation, arbitration, lawsuit, or appeal there from arising out of or relating to the enforcement or interpretation of this Agreement, the prevailing party shall be entitled to an award for its reasonable attorney fees and costs incurred therein and on appeal.

15. Governing Law and Venue. This Agreement shall be governed by the laws of the State of Colorado without regard to conflicts of law principles. Any mediation, arbitration, or other legal action arising out of or relating to the enforcement of this Agreement shall be commenced in Boulder or Montrose, Colorado.



16. Guarantee of Payment. Student's Parent(s) or Guardian(s) understand and agree that such Parent(s) or Guardian(s) hereby guarantee payment of all tuition, fees and costs incurred by, or on behalf of, Student pursuant to this Agreement.

17. Complete Agreement. This Agreement, together with the Appendices A-H attached hereto, represent the complete and final agreement of the parties regarding the subject matter herein. This Agreement supersedes any and all prior agreements or understandings of the parties, whether written or oral, regarding the subject matter herein. The undersigned hereby agree to all terms and conditions contained in this Agreement and Appendices A-H.

Participant signature

Parent/Legal Guardian Signature

Participant Print name here

Parent/Legal Guardian Print Name

Date

Date

Date of Birth

Age



APPENDIX A
ECOTHROPIC POLICIES

• *Violation of policies will result in either immediate dismissal from the program or in a verbal/written contract identifying behavior or issue(s) and outlining steps to correct or make amends as well as clear consequences.*

Initial after each item, then **sign** at the bottom.

1. No Drugs. This includes purchase, possession, use of, or being around others using drugs that are illegal in the U.S.A. and/or in Cuba Also includes abuse or misuse of prescription and/or over-the-counter drugs.
2. I will not engage in risky and/or harmful behaviors. This includes but is not limited to: refraining from riding motorcycles, participating in unsanctioned adventure activities, breaking laws, physical abuse, and abuse of prescription medication. Students also agree to stay in Ecothropic sanctioned housing.
3. I will challenge myself culturally and personally. This includes full participation in all aspects of the program.
4. I will treat myself and others with respect. If at any point the instructor deems that you are putting yourself, others, the program, relationships with our local partners in danger, or undermining your full participation in the course, you will be removed from the program. This includes culturally appropriate clothing/language, respectful communication, and respect of others' space and belongings.

Participant signature

Parent/Legal Guardian Signature

Participant Print name here

Parent/Legal Guardian Print Name

Date

Date

Date of Birth

Age



APPENDIX B PARTICIPANT RELEASE AND INDEMNITY AGREEMENT

I, (or if I am under the age of 18 at the time of signing, my undersigned parent or legal guardian), understand that Ecothropic, LLC. (“Ecothropic”) does not want to reduce my enthusiasm for participating in its programs and that Ecothropic as a matter of integrity and accountability wants me to know in advance the inherent potential risks of the program and the associated activities. I understand that Ecothropic takes reasonable steps to seek to provide a safe environment. However, I also understand that certain risks are inherent in the program and cannot be eliminated. I understand that my participation in the Ecothropic program exposes me to a series of risks, some of which are listed below, and others which have been described in other information provided to me by Ecothropic, any of which could result in serious injury or even death. I have read the detailed descriptions of warnings and hazards associated with such countries, found online at the U.S. State Department website: <http://www.travel.state.gov/travel/>. I understand and accept those risks listed, and any other risks associated with the Ecothropic program in said countries and the U.S. Those risks include, but are not limited to risks associated with:

- Travel by air, road, train, boat and on foot. Not in every case will local vehicles have standard safety systems such as seat belts. Travel to and from our U.S. and international program sites, and to and from a site of emergency medical care;
- Acts injurious to my person or property due to contact with natives of each country and the U.S.;
- Sickness and disease;
- Hiking, trekking and other physical activity;
- Use of power and hand tools and other risks associated with doing construction, landscaping, and kitchen work;
- Political and/or social unrest;
- Risks associated with outdoor physical activities (such as walking or running on uneven ground) including slips and falls, bruises, sprains, lacerations, fractures, and concussions;
- Contact with plants, animals, snakes or insects that could cause stings, bites, allergies, or disease;
- Exposure to fire or heat from natural or manmade causes that could cause burns, dehydration, and fainting;
- Exposure to cold, wet weather, to other unpredictable forces of nature, and acts of God;
- Exposure to the conduct of other participants;
- Failure or malfunction of equipment; Being in a remote location, distant from medical facilities, where evacuation and medical care could be delayed; and
- Swimming in pools and bodies of waters.

I understand that this list is not complete and that other unknown or unanticipated risks may result in property loss, serious injury, illness, or death. Another risk is the potential misjudgment by Ecothropic instructors, volunteers, other staff members, co-participants or contractors related to my participation, including but not limited to decisions regarding my physical condition and capabilities, weather, water, terrain, route or medical treatment. That said, Ecothropic instructors have access to 24-hour medical consultation, are trained and certified in wilderness medicine, and may consult with medical specialists including RNs, paramedics, doctors, and mental health clinicians on a case-by-case basis. I, and my parent or guardian, where applicable, accept the risks and responsibilities associated with this lack of personal supervision and accept the personal responsibility associated with making important personal decisions regarding my physical condition and capabilities, weather, water, terrain, route or medical treatment. All of the above risks are inherent to the activities in a Ecothropic program, which means that they cannot be changed or eliminated without altering the essential elements of the activity. With these risks in mind, and in consideration of the services of Ecothropic, I, (and my parent or legal guardian, where applicable,) acknowledge and agree as follows:

Acknowledgment and Assumption of Risks

I understand that I share the responsibility for my safety, for managing the risks, and for determining my suitability for the program in which I will participate. I have accurately completed the Ecothropic application and medical forms and have reviewed all Ecothropic program information provided me. I agree to obey all



Ecothropic rules, regulations, and policies. I have reviewed the Essential Eligibility Criteria upon submitting my application and state that I meet all such criteria. I have had the opportunity to ask questions about the program activities and the risks of the program in which I (or my child) will participate. I acknowledge that participating in a Ecothropic program involves inherent risks and dangers including some not listed above that can cause or lead to death, injury, illness, property damage, mental or emotional trauma, or disability. Furthermore, activities may take place several hours or days from any medical facility, or where communication, transportation or evacuation is subject to delay. I understand that Ecothropic cannot ensure my (or my child's) safety and does not seek to eliminate all of these risks. I agree to assume all of the risks of the activities of my (or my child's) Ecothropic program whether inherent or not and whether described above or not.

Release and Indemnity Agreement

In consideration of being allowed to participate in a Ecothropic program, I, or if I am under the age of 18 at the time of signing, my parent or guardian, hereby forever release, waive and discharge Ecothropic, and each of its respective agents, employees, officers, directors, trustees, independent contractors, volunteers and all other persons or entities acting under their direction and control (collectively referred to as "the Released Parties") from, and agree not to pursue a claim against or sue, the Released Parties, or any of them, for any liability, claim, or expense in any way associated with my enrollment or participation in the Ecothropic program or the use of any equipment or facilities, except as provided herein. Neither I, nor anyone acting on my behalf, will make a claim against the Released Parties as a result of any injury, illness, damage, death, or loss unless caused by the gross negligence of the Released Parties, or any of them. This release applies to the fullest extent allowed by law and includes claims for injury, property damage, wrongful death, breach of contract, or any other type of suit.

I, or if I am under the age of 18 at the time of signing, my parent or guardian, further agree to defend, indemnify and hold Ecothropic harmless from any amounts it is required to pay, including attorney's fees and costs, with respect to any and all claims brought by or on behalf of me, my child, a family member, personal representative, estate, a co-participant, or any other person for any claims related to my (or my child's) enrollment or participation in the program or my (or my child's) use of equipment or facilities, except as provided herein.

I HAVE CAREFULLY READ, UNDERSTAND, AND VOLUNTARILY SIGN THIS DOCUMENT. I UNDERSTAND THAT I AM SURRENDERING CERTAIN LEGAL RIGHTS. I AGREE THAT THIS FORM SHALL BE BINDING ON ME, MY MINOR CHILDREN AND OTHER FAMILY MEMBERS AND MY HEIRS, EXECUTORS, REPRESENTATIVES AND ESTATE. I HEREBY REPRESENT AND WARRANT THAT I HAVE LEGAL AUTHORITY TO ACT ON MY CHILD'S BEHALF. I AGREE, ON MY OWN, AND ON MY CHILD'S BEHALF, TO THE TERMS AND CONDITIONS IN THIS DOCUMENT.

If participant is under the age of 18 at the time this document is signed, a parent or legal guardian must sign the Release on behalf of the participant.

Participant signature

Parent/Legal Guardian Signature

Participant Print name here

Parent/Legal Guardian Print Name

Date

Date

Date of Birth

Age



APPENDIX C
MEDICAL PROFILE

Ecothropic Programs are often located in remote settings. Full disclosure of a Student’s medical and mental health condition is critical to ensure appropriate emergency treatment. No health disclosure will automatically affect Student’s acceptance into a Ecothropic Program; however, we may ask for additional information or engage in additional research to support Student’s safety.

Student Name: _____

Program: _____

Allergies (please note “severe” when appropriate)? What symptoms have you or might you experience if you are exposed to this allergen? Do you carry an EpiPen?

Physical issues that might affect hiking, volunteering, or traveling?:

Current medications:

All mental health diagnoses (please state whether current or when last symptomatic):

Dietary needs (please note “preferences” where appropriate):

Other:



To the best of my knowledge, I verify that the above information is true. Any misinformation may result in immediate dismissal from your Program at Ecothropic's sole discretion. I further agree not to adjust any prescription medications for the duration of the program without a treating physician's written authorization and prior notice to Ecothropic.

Participant signature

Parent/Legal Guardian Signature

Participant Print name here

Parent/Legal Guardian Print Name

Date

Date

Date of Birth

Age



APPENDIX D

CONSENT FOR MEDICAL TREATMENT OF A MINOR CHILD and AUTHORIZATION TO TRANSPORT A MINOR CHILD INTERNATIONALLY

Please ONLY complete this form if the participant is under 18 at the time of enrollment.

As the parent or legal guardian of _____(Print Name)(My Dependent), I hereby give Ecothropic, staff, and representatives consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under any conditions that are reasonably deemed necessary by any attending physician to preserve the life, limb, or well being of My Dependent.

I also hereby authorize any and all representatives of Ecothropic to escort My Dependent out of the United States.

Participant signature

Parent/Legal Guardian Signature

Participant Print name here

Parent/Legal Guardian Print Name

Date

Date

Date of Birth

Age



APPENDIX E
IMMUNIZATIONS & MALARIA PROPHYLAXIS

IMMUNIZATIONS

While traveling to any destination you should be up to date on routine vaccinations. Some destinations may also require specific vaccinations to gain entry. Please consult the Centers for Disease Control Travelers' Health Website for further details: <http://wwwnc.cdc.gov/travel/destinations/list/> The following vaccinations are recommended by the Centers for Disease Control for all Ecothropic program locations: Typhoid, Hepatitis A & B, Influenza, MMR (Measles, Mumps, Rubella), and Tetanus.

MALARIA PROPHYLAXIS

The risk of malarial infection varies on each of our programs. Taking a malaria prophylaxis is not required, but is strongly recommended. Each student should consult with their medical practitioner and the Centers for Disease Control for information on which type of prophylaxis is most appropriate for the region of travel.

Please indicate below for the malaria prophylaxis you have chosen:

- Malarone
- Doxycycline
- Chloroquine
- Larium / Mefloquine
- Natural methods (ie, naturopathy)
- None

I, _____, hereby represent that I have done the research and take full responsibility for getting adequate prophylaxis against Typhoid, Hepatitis A & B, Influenza, MMR, Tetanus and Yellow Fever (if applicable) for the duration of my program with Ecothropic. Furthermore, I have consulted with my physician and I will be personally responsible for my own malaria prophylaxis (if applicable). I have researched and understand the potential consequences of not taking any one or more of the above vaccinations as well as an appropriate malaria prophylaxis (if applicable).

I acknowledge the risks of travel in an area where I may be exposed to the Zika virus and other illnesses. I have consulted with a medical professional about how to take the appropriate measures to protect myself from Zika and other possible illnesses. I assume responsibility for these risks.

Participant signature

Parent/Legal Guardian Signature

Participant Print name here

Parent/Legal Guardian Print Name

Date

Date

Date of Birth

Age



APPENDIX F
DOMESTIC AIRLINE INFORMATION

Please wait to book your domestic flights, to and from the international departure airport, until after the international airfare has been arranged. Due to constraints by the airlines and flight rules and changes, it is unlikely though possible that our actual departure date may vary from the advertised itinerary.

Please provide a phone number where we can reach you during the 48 hours prior to Program Departure:

If a student's domestic flight to the Program Departure airport is late or delayed, please call us at the number that will be supplied to you with the details of your international travel itinerary.

Student Name: _____

How will you be arriving at the departure airport? _____

Will you be arriving the day prior to departure? If so, please give us the name and number of where you will be staying this night.

Departing airport: _____

Flight Date: _____

Flight #: _____

Airline: _____

Scheduled Arrival Time: _____

NOTE: It is possible that your air travel will not be finalized until as late as one month prior to departure. Do not worry! Our VERY reliable travel consultant is working to ensure that you receive the best possible flight option.



APPENDIX G
CERTIFICATION OF UNDERSTANDING AND COMPLIANCE
FOR PEOPLE-TO-PEOPLE TRAVEL TO CUBA

Understand that I am travelling to Cuba with Ecothropic under a General License as pursuant to the Cuban Assets Control Regulations, 31 C.F.R. Section 515.565 (b). I have read this section. I understand the requirements and restrictions for travel to Cuba (please see <http://www/ecfr.gov>), and as such, I certify that I am in compliance with all requirements for travelling to Cuba in accordance with the above named regulations, including:

- (1) The exchanges take place under the auspices of an organization that is a person subject to U.S. jurisdiction and that sponsors such exchanges to promote people-to-people contact;
- (2) Travel-related transactions pursuant to this authorization must be for the purpose of engaging, while in Cuba, in a full-time schedule of activities intended to enhance contact with the Cuban people, support civil society in Cuba, or promote the Cuban people's independence from Cuban authorities;
- (3) Each traveler has a full-time schedule of educational exchange activities that will result in meaningful interaction between the traveler and individuals in Cuba;
- (4) An employee, paid consultant, or agent of the sponsoring organization accompanies each group traveling to Cuba to ensure that each traveler has a full-time schedule of educational exchange activities; and
- (5) The predominant portion of the activities engaged in by individual travelers is not with individuals or entities acting for or on behalf of a prohibited official of the Government of Cuba, as defined in 31 CFR 515.337 of this part, or a prohibited member of the Cuban Communist Party, as defined in 31 CFR 515.338 of this part.

Furthermore, I agree to create a full and accurate record of my activities during the duration of my stay in Cuba, including the names of individuals I interact with and a description of each exchange, demonstrating why each activity/exchange constitutes a meaningful exchange between myself and individuals in Cuba.

I agree to keep this record for five years from the date of the end of the trip.

Program and Dates _____

Name _____

Signature _____

Date _____



APPENDIX H
RELEASE OF LIABILITY FOR CUBA PROGRAMS

If participant is under the age of 18 at the time this document is signed, a parent or legal guardian must sign the Release on behalf of the participant. Please read carefully before signing this release of liability and waiver of certain legal rights I, the undersigned, being at least 18 years old, hereby release and indemnify Ecothropic of Colorado (“Ecothropic”), its affiliates, their respective officers, directors, agents, servants and employees of and from any liability claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, injury, including death to you or a third party, that may be sustained as a result of participating in a trip to Cuba, including, but not limited to, those injuries and damages caused by the negligence and/or breach of warranty, express or implied, on the part Ecothropic. I agree to comply fully with all USA and Cuban laws, rules, and regulations while a participant in a trip to Cuba under the licenses of Ecothropic. I have been advised to read and have a working knowledge of the contents of any publications related to travel to Cuba issued by the U.S. State Department and the U.S. Treasury Department, esp. the Office of Foreign Assets Control. I fully understand that my request and application to travel to Cuba through Ecothropic does not guarantee me travel to Cuba and Ecothropic does not require the Government of Cuba to issue a tourist card or visa to me. I CONTRACTUALLY AGREE that any and all disputes between myself and Ecothropic arising from my participation in a trip to Cuba and including any claims for personal injury and/or death, WILL BE GOVERNED BY THE LAWS OF THE STATE OF COLORADO for Ecothropic, and EXCLUSIVE JURISDICTION thereof will be in the state court residing in the county where the alleged tort occurred or the federal courts of the State of Colorado. In the event any section of this release is found to be unenforceable, the remaining terms shall be fully enforceable. This release shall be binding to the fullest extent permitted. This release shall be binding upon my assignees, subrogors, distributees, heirs, next-of-kin, executors, personal representatives, and administrators and may be pled by travel agencies or others as employed by Ecothropic as a complete bar and defense against any claims, demand, action or causes of action by or on behalf of the participant in travel to Cuba. I HAVE CAREFULLY READ THE FOREGOING LIABILITY RELEASE, UNDERSTAND ITS CONTENTS AND SIGN IT WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE. I am depositing \$1000 USD made payable to Ecothropic, which is completely non-refundable unless the trip is cancelled for any reason upon which a \$150 administrative fee per traveler is retained by Ecothropic. The remaining funds are returned to the applicant. Ecothropic reserves the right to cancel the Program at any time prior to departure. I understand the total liability Ecothropic has to my assigns or me is limited to the monies Ecothropic has actually received from me. Any fees I have paid for food and lodging, visas, tourist cards, airline tickets, insurance, car rentals, transportation, etc. are non-refundable unless alternative arrangements have been made between my travel agency and me. I understand that I am travelling to Cuba with Ecothropic under a General License as pursuant to the Cuban Assets Control Regulations, 31 C.F.R. Section 515.565 (b) (Appendix G). I further understand that Ecothropic does not utilize a specific OFAC license, as the Program is licensed according to the aforementioned general license. As such, I understand that Ecothropic is not a licensed OFAC travel services provider and does not engage in travel-related services to, from or within Cuba or the USA. I also understand Ecothropic does not have a direct or indirect commercial relationship with any governmental entity of Cuba or Cuban national and fully complies with all USA laws, rules and regulations regarding Cuba. As a traveler under OFAC issued license, I agree, by signing this application, to comply with all USA laws, OFAC rules, regulations and orders regarding travel to, from and within Cuba and the intention of my travel is to participate in full-time educational activities according to the Program.

Participant signature _____
Participant Print name here _____
Date _____
Date of Birth _____
Age _____

Parent/Legal Guardian Signature _____
Parent/Legal Guardian Print Name _____
Date _____