

**Sohoyini Dance**  
c/o Awal Alhassan  
216 NW 67<sup>th</sup> St  
Seattle, WA 98117-4840

(206) 383-2243  
info@sohoyini.com  
www.sohoyini.com

# 2009-2010 Trip Application

**IMPORTANT:** This form must be filled in its entirety, signed, and returned as soon as possible to secure your space. \$500 per person is due with this application. If you are signing up after September 09, both first and second deposits (\$1000) total per person) are due. For two or more people, please fill out one application for each person. (You can photocopy the application if necessary.) Please print or type all information.

Your Full Name (exactly as it appears in your passport) \_\_\_\_\_

Do you have another name you like to go by? \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

Home phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home email \_\_\_\_\_ Work email \_\_\_\_\_

Occupation \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_

Birthdate (MM/DD/YYYY) \_\_\_\_\_ Birthplace \_\_\_\_\_ Citizenship \_\_\_\_\_

Passport number \_\_\_\_\_ Place of Issue \_\_\_\_\_ Expiration \_\_\_\_\_

Dietary Restrictions/Preferences \_\_\_\_\_

Prefer emphasis on  Dance  Drum  
Dance ability level  Beginning  Intermediate  Advanced  
Drum ability level  Beginning  Intermediate  Advanced

I am willing to share a double room  
 I prefer a single room at supplemental cost (if available)

How did you find out about Discover Ghana? \_\_\_\_\_

Medical concerns we should be aware of \_\_\_\_\_

Do you currently have a health insurance policy?  Yes  No

Name of company and policy number \_\_\_\_\_

In case of emergency, please notify \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Relation \_\_\_\_\_

# Release of Liability & Assumption of All Risks

## ASSUMPTION OF RISKS

I, \_\_\_\_\_, acknowledge that I have voluntarily applied to participate in the trip designated on this application . I am voluntarily participating on the tour with knowledge that travel to the foreign countries and/or remote areas visited by this trip involves numerous risks and dangers including, but not limited to: the forces of nature; civil unrest; terrorism; roads, trails, hotels, vehicles, boats or other means of conveyance which are not operated or maintained at standards common in the United States; accident or illness without access to means of rapid evacuation or availability of medical supplies; the adequacy of medical attention once provided; physical exertion for which I am not prepared; consumption of alcoholic beverages; or negligence (but not willful or fraudulent conduct) on the part of Sohoyni Dance, or others. I acknowledge that the enjoyment and excitement of travel is derived in part from the inherent risks incurred by travel and activity beyond the accepted safety of life at home or work and that these inherent risks contribute to such enjoyment and excitement, being a reason for my voluntary participation. I HEREBY AGREE TO BE RESPONSIBLE FOR MY OWN WELFARE, AND ACCEPT ANY AND ALL RISKS OF DELAY, UNANTICIPATED EVENTS, ILLNESS, INJURY, EMOTIONAL TRAUMA, OR DEATH AND VERIFY THIS STATEMENT. **(Initial here \_\_\_\_\_)**

## RELEASE

I acknowledge that the cost of all Sohoyni Dance trips is based upon Trip Participants executing this Release of Liability and Assumption of All Risks. Therefore, as lawful consideration for being permitted to participate on such trip(s), I hereby RELEASE AND DISCHARGE SOHOYINI DANCE AND ITS AGENTS AND EMPLOYEES FROM AND AGAINST ANY AND ALL LIABILITY ARISING FROM MY PARTICIPATION IN THE TOUR. I agree that this release shall be legally binding upon myself, all minors under the age of 21 traveling with me, my heirs, successors, assigns, and legal representatives; it being my intention to fully assume all the risk of travel and to release Sohoyni Dance from any and all liabilities to the maximum extent permitted by law. **(Initial here \_\_\_\_\_)**

I understand that all applications are subject to acceptance by Sohoyni Dance and upon acceptance shall be deemed to have been entered into and to be performed in Seattle, Washington. In the unlikely event a legal dispute should arise involving any subject matter whatsoever, I agree that the following conditions will apply: (a) the dispute will be submitted to a neutral third-party mediator in Seattle, Washington with both parties splitting equally the costs of such a mediator. If the dispute cannot be resolved through mediation then (b) the dispute shall be submitted for binding arbitration through the American Arbitration Association in Seattle, Washington; (c) the dispute will be governed Washington State law; and (d) the maximum amount of recovery to which I will be entitled under any and all circumstances will be the cost of my trip with Sohoyni Dance. **(Initial here \_\_\_\_\_)**

## PHOTOGRAPH RELEASE

I hereby grant Sohoyni Dance permission to use, without limitation or obligation, my image or voice in photograph(s), video, or other media in any and all of its publications and in any and all other media, whether now known or hereafter existing. I will make no monetary or other claim against Sohoyni Dance for the use of the photograph(s), video, or other media. **(Initial here \_\_\_\_\_)**

## KNOWING AND VOLUNTARY EXECUTION

I have carefully read and fully understand the contents and legal ramifications of this agreement. I understand this is a legally binding and enforceable contract and sign it of my own free will. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect. **(Initial here \_\_\_\_\_)**

Signature of Applicant \_\_\_\_\_

Dated: \_\_\_\_\_

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

## Parent's 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 Sohoyni Dance to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless Sohoyni Dance 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 \_\_\_\_\_

Dated: \_\_\_\_\_

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

# Trip Payment Information

**Schedule of Payments:**

\$500 Upon registration to secure your space  
\$500 September 09, 2008  
\$800 November 04, 2008

If you are registering after September 09, both first and second deposits (\$1000 total per person) are due.

I would like to pay with:

- Check or Money Order
- Credit Card (payable on our website through Paypal)
- Other \_\_\_\_\_

I am enclosing a check or money order payable to SOHOYINI DANCE for:

- Initial deposit (\$500)
- Both deposits (\$1000)
- Entire payment (\$1800)

**CANCELLATION:** If you cancel your trip, the following charges may apply: non refundable cancellation charge of \$250; cancellation 31-59 days prior to the trip departure, 25% of trip cost; cancellation 15-30 days prior to the trip departure 50% of trip cost; cancellation made 14 days or less prior to departure, no refund.

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