

SCOTT FISCHER MEMORIAL CONSERVATION FUND GRANT

The American Alpine Club established the Scott Fischer Memorial Conservation Fund in memory of Scott Fischer, who lost his life on Mount Everest in May 1996. The purpose of this grant is to help fund environmentally proactive expeditions to mountain regions throughout the world.

The application deadline is March 1st. Grant applications must be made electronically in MS Word or PDF format by the due date. A valid scanned signature and initials must be inserted into the document in the appropriate sections. No late applications accepted and awards are around \$300.

Selection Criteria

- American climbers or expeditions who propose well-planned mountain conservation projects.
- Projects attempting to remove past expeditions' garbage and equipment or to initiate similar projects are favored.
- Expeditions must exceed normal expedition clean-up procedures as outlined by the host country or land manager to be considered.
- Membership in The American Alpine Club is not a prerequisite.
- There are no age limitations for this award.

Responsibilities

Each recipient must submit a formal report for the committee's review and possible publication in AAC publications.

Submit application to:

The American Alpine Club
ATTN: Fischer Conservation Grant
Email: getinfo@americanalpineclub.org
Tel: (303) 384-0110

SCOTT FISCHER MEMORIAL CONSERVATION FUND GRANT APPLICATION

In order to process your application as quickly as possible we ask that you please:

- Submit electronically in MS Word or PDF formats. You must include a valid scanned signature and initials inserted into the document or send a signed copy of this application by post.
- Type or print clearly
- Submit to the AAC on or before the March 1st deadline.

Name: _____ Social Security (for tax purposes only): _____

Street: _____ Date of Birth: _____

City/State/Zip: _____

Primary Phone: _____ Email: _____

- Yes, I am a U.S. citizen (only U.S. citizens or American expeditions may apply)
- Yes, I am a member of the AAC (membership is not a requirement but is appreciated)

Project for which financial aid is sought (climbing area, peak(s), specific known routes, etc.):

Explain in less than 100 words the proposed project's significance (clean-up, environmental impact, new conservation project, etc.):

Names of other expedition members:

Most important ascents (no more than five) within the last five years:

List names, email addresses and telephone numbers of two people with whom you've climbed to serve as references:

By my signature, I agree that:

- All of the information presented in this application is accurate and true.
- Any awarded funds will be used for the purposes stated and that any changes in plans will be reported to the AAC.
- If for any reason the climbing objective is canceled or significantly changed (i.e. a new route attempt on Rakaposhi turns into rock climbing in Thailand) awarded funds must be returned to the AAC.
- I will be responsible for any taxes that may apply to the award received.
- Neither I, nor any member of my team, have been convicted of any crime or been excluded, banned, or disciplined from climbing in any area.
- In any presentations, lectures, or slide shows about my trip, I will mention that I received an AAC grant and include an AAC slide (sent to all winners) in my show.

Signed: _____ Date: _____

Additionally, the AAC appreciates your submitting a project report 60 days after your return and allowing the AAC to include it in any publications (copies of photos are also appreciated.)

AGREEMENT

Release and Discharge, Acceptance of Responsibility and Acceptance Of Risks

THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS. YOU MUST READ AND UNDERSTAND IT BEFORE INITIALING OR SIGNING IT.

Name _____

If under age 18,name of guardian _____

Address _____

Phone _____

Date _____

I, the above named person, being above age eighteen, or the legal guardian of the above named person who is under age eighteen, in consideration of receiving a grant from the American Alpine Club, hereby acknowledge, agree and promise and covenant with the American Alpine Club and all other persons or entities, and release and discharge the American Alpine Club on behalf of myself, my heirs, assigns, personal representatives and estate as follows:

ACKNOWLEDGEMENT OF RISK

I understand and acknowledge that the activity for which I am receiving this grant in and which I voluntarily engage in bears certain risks that could result in injury, death, illness or disease, physical or mental, or damage to my property. Among these risks are the following:

1. The nature of the activities themselves, mountaineering, rock climbing, ice climbing and any combination thereof ;
2. acts or omissions or negligence in any degree of the American Alpine Club, its agents or employees, and other persons or entities;
3. the acts of other participants in these activities;
4. weather conditions;

5. contact with plants or animals;
6. my own physical condition, or my own acts or omissions;
7. condition of roads, trails, waterways or terrain, and accidents connected with their use and the use of vehicles of approach, including, but not limited to land vehicles, aircraft, fixed and rotary wing;
8. first-aid, emergency treatment or other services rendered;
9. consumption of food or drink.

I understand and acknowledge that the above list is not complete or exhaustive, and that other risks, known or unknown, identified or unidentified, may also result in injury, death, illness or disease or damage to my property

I HAVE READ THIS SECTION AND INITIAL IT TO SHOW THAT I UNDERSTAND AND AGREE_____

RELEASE

I hereby voluntarily release and forever discharge the American Alpine Club, its agents or employees, and all other persons or entities from any and all liability, claims, demands, actions or rights of action, which are related to the activity for which the grant is received, **including specifically, but not limited to, the negligent act or acts or omissions of the American Alpine Club**, its agents, or employees, and other persons or entities, for all injury, death, illness or disease and damage to my property.

I further agree, promise and covenant to hold harmless and indemnify **the American Alpine Club**, its agents or employees and all other persons or entities for any such injury, death, illness, disease or damage.

I agree, promise and covenant not to sue, assert or otherwise maintain or assert any claim against **the American Alpine Club**, its agents or employees, and all other persons or entities, for any injury, death, illness, disease or damage to my property, arising from the receipt of said grant or connected with my participation in these activities.

I have read this section and initial it to show that I understand and agree:_____

ACKNOWLEDGEMENT OF EFFECT OF THIS RELEASE AGREEMENT

I understand and acknowledge that by initialing and signing this document I have given up certain legal rights and/or possible claims which I might otherwise assert or maintain against **the American Alpine Club**, its agents or employees, and other persons or entities, **including specifically, but not limited to, rights arising from the acts or omissions, and negligence in any degree, of the American Alpine Club, its agents or employees, and all other persons or entities.**

It is agreed and understood by and between the parties that any legal dispute arising out of the Agreement is to be adjudicated under the laws of the State of Colorado.

It is also agreed and understood by and between the parties that, if any Court should vacate or strike and portion of this Agreement, such vacating or striking will not effect any other portion of this Agreement.

I have read this section and initial it to show that I understand and agree: _____

ENTIRE AGREEMENT

I understand that this is the entire agreement between me and **the American Alpine Club, its agents** or employees, and it cannot be modified or changed in any way by the representations or statements of any employee or agent of **the American Alpine Club**, or by me.

I have read this section and initial it to show that I understand and agree: _____

My signature below indicates that I have read this entire document, understand it completely and agree to be bound by its terms.

DATE: _____

SIGNATURE OF RECIPIENT: _____

SIGNATURE OF PARENT OR GUARDIAN (if under age 18) _____

SIGNATURE OF WITNESS: _____