



INDIVIDUAL TRIP APPLICATION

AGENT CODE

Mongolian Ways, Ulaanbaatar, Mongolia Email: trips@mongolian-ways.com Fax: 976-11-330350

Thank you for choosing Mongolian Ways. Please complete this form as accurately as possible so we can better prepare for your trip to Mongolia. All pages must be completed and returned before your reservation can be confirmed, even if you have already paid a deposit. One application should be completed for each traveler. Click in the grey boxes to enter your information into the form. **We will not trade, exchange or misuse the information provided here.**

TRAVELER INFORMATION

Trip Name or Code Departure Date (m/d/yyyy)

Full Name (as it appears on your passport)

Waypoints ID No. if member Apply accrued Waypoints to the cost of this trip? yes no

Mailing address

City Country Postal Code

Phone Mobile Fax

Email Occupation

Female Male Single Married Date of birth (m/d/yyyy)

Country of Birth Citizenship

Passport No. Issued (m/d/yyyy) Expires (m/d/yyyy)

Have you been on previous Mongolian Ways tour? yes no

Which ones (including year)?

I prefer a single room at supplement cost I am willing to share a room Smoker yes no

Please detail all dietary restrictions you have and any dietary preferences:

Describe the nature and extent of your camping, hiking, or other outdoor experience:

How did you hear about Mongolian Ways? Search Engine If other, please describe:

If you are not already a member of the waypoints program, you can join now. The Waypoints program is a program designed to reward our loyal customers by enabling them to accrue points for trips taken with Mongolian Ways, and apply these toward the cost of future trips. For more information on the Waypoints program, please visit our website. Waypoints members receive quarterly email newsletters informing them of new travel opportunities with Mongolian Ways, exclusive trips, and special events.

I would like to joint the Waypoints program yes no Send my point statements by email paper mail

CONFIDENTIAL MEDICAL HISTORY AND INSURANCE RECORD

Age	yrs	Height	ft <input type="checkbox"/>	meters <input type="checkbox"/>	Weight	lbs <input type="checkbox"/>	kg <input type="checkbox"/>
Doctor's Name		Office Tel.		Mobile.			
Medical Insurance				Policy Number			
Name of Policy Holder				Insurance Tel.			
Emergency Contact Person				Relationship			
Home phone		Mobile phone					

If you have had any of the following, please mark and give details in the space provided below:

1. Adverse effects while traveling at high altitude	yes <input type="checkbox"/>	no <input type="checkbox"/>
2. Dizzy spells, fainting, convulsions, severe motion sickness	yes <input type="checkbox"/>	no <input type="checkbox"/>
3. Frequent infection of throat, sinuses, ears or chronic bronchitis	yes <input type="checkbox"/>	no <input type="checkbox"/>
4. Shortness of breath, asthma	yes <input type="checkbox"/>	no <input type="checkbox"/>
5. Chest pain on exertion, angina, history of heart disease	yes <input type="checkbox"/>	no <input type="checkbox"/>
6. Low or high blood pressure	yes <input type="checkbox"/>	no <input type="checkbox"/>
7. Frequent diarrhea or blood in stools	yes <input type="checkbox"/>	no <input type="checkbox"/>
8. Abdominal cramps, severe menstrual cramps	yes <input type="checkbox"/>	no <input type="checkbox"/>
9. Difficulty urinating, kidney infection or stones	yes <input type="checkbox"/>	no <input type="checkbox"/>
10. Previous broken bones, surgery of any kind	yes <input type="checkbox"/>	no <input type="checkbox"/>
11. Joint pain, stiffness or swelling without injury	yes <input type="checkbox"/>	no <input type="checkbox"/>
12. Any severe injury to head, chest, internal organs	yes <input type="checkbox"/>	no <input type="checkbox"/>
13. Severe and prolonged illness	yes <input type="checkbox"/>	no <input type="checkbox"/>
14. Allergy to medicines, foods, insects, or environmental factors	yes <input type="checkbox"/>	no <input type="checkbox"/>
15. History of psychiatric care, claustrophobia, acrophobia, etc.	yes <input type="checkbox"/>	no <input type="checkbox"/>
16. Problems with vision or hearing, wear glasses, hearing aid, contact lenses	yes <input type="checkbox"/>	no <input type="checkbox"/>
17. Do you have dentures, a bridge or braces?	yes <input type="checkbox"/>	no <input type="checkbox"/>
18. Do you wear prosthesis, braces, or use other physical aids?	yes <input type="checkbox"/>	no <input type="checkbox"/>

Emergency evacuation/repatriation insurance is a requirement for all travelers on Mongolian Ways trips. In the event you must be evacuated for medical reasons, you will bear the financial responsibility for costs incurred. You must provide proof of insurance prior to the start of the trip.

Anything else we should know regarding your medical history, current state of health or safety concerns?

DECLARATION OF APPLICANT

If you are emailing this form, please leave the signature space blank. You will be asked to sign the form on your arrival in Mongolia and before the start of the trip.

Declaration: I the undersigned hereby declare that all above information is true and correct:

Signature of Applicant: _____ Date (m/d/yyyy) _____

Parent or guardian of a minor: I certify that I am the parent or legal guardian of the minor applicant named in the trip application above, and I hereby give my permission for this minor to participate in the trip or expedition.

Name of parent/guardian: _____

Signature of releaser: _____ Date (m/d/yyyy) _____

ACCEPTANCE OF TERMS AND CONDITIONS - PLEASE READ CAREFULLY

1. Mongolian Ways Co. Ltd. gives notice that some services provided in connection with its itineraries, including transportation, hotel accommodations, restaurants, and other services, are purchased from independent suppliers who are not affiliated with Mongolian Ways Co. Ltd. in any way. Although we endeavor to choose the best suppliers available, Mongolian Ways Co. Ltd. Does not control their operations and therefore makes all travel arrangements upon the express condition that Mongolian Ways Co., Ltd., and its own agents and employees, shall not be liable for any delay, mishap, inconvenience, expense, irregularity, bodily injury or death to person, or damage to property occasioned through the conduct or default of any company or individual engaged in providing these services. Mongolian Ways Co. Ltd. shall not be liable for: (a) expenses such as additional hotel nights and meals not specified in the individual trip itineraries that may be required either en route, prior to, or following a trip, when caused by individual clients' travel arrangements, by airline scheduling or airline schedule changes, canceled flights, missed flight connections, or by other factors not under Mongolian Ways Co. Ltd. control; (b) expenses incurred in recovering luggage lost by airlines, belongings left behind on a trip, or in shipping purchases or other goods home from abroad; (c) bodily injury or property damage for any reason, including but not limited to acts of God, weather, quarantines, strikes, civil disturbance, theft, default, detention, annoyance, changes in government regulations, terrorism, war, or failure of conveyance to arrive or depart as scheduled, etc., over which it (Mongolian Ways Co. ,Ltd.) has no control.
2. Mongolian Ways Co. Ltd. reserves the right to take photographic or film records of any of our trips, and may use any such records for promotional and/or commercial purposes.
3. Mongolian Ways Co. Ltd. reserves the right to substitute trip leaders, departure dates and hotels from those listed in the catalog without notice.
4. Mongolian Ways Co. Ltd. reserves the right to decline any applicant, and to exclude from further participation any person it judges: (a) does not meet the physical or other requirements of participating in the trip or activities envisaged; (b) acts or behaves in a manner that impedes trip operation or the rights, well being, or enjoyment of other trip members; (c) acts or behaves in a way damaging to Mongolia's natural, cultural, or environmental resources after being duly informed of trip guidelines and local customs and traditions. A refund based on cost of unused land services is the limit of Mongolian Ways Co. ,Ltd. responsibility in such a case.
5. Trip members have the responsibility to select a trip appropriate to their abilities and interests. In order to assist you we grade each trip with a Trip Rating. We are also happy to discuss the trip with you, as well as provide you with names of past participants who can discuss their experience with you. Trip members are responsible for being sufficiently fit and in good health to undertake the trip. Trip members are responsible for preparing for the trip by studying the itinerary and pre-departure information packets sent by Mongolian Ways Co. Ltd. and for bringing the appropriate clothing and equipment as advised therein.
6. Trip members are responsible for the proper care and use of any equipment and gear provided for their use by Mongolian Ways Co. Ltd. for the entire duration of the trip. This includes but is not limited to tents, sleeping pads or mattresses, saddles, folding chairs and tables, shower and toilet equipment. Trip members will examine equipment assigned to them and will immediately inform Mongolian Ways staff if any equipment appears to be damaged or otherwise not in good working condition. Trip members acknowledge responsibility for the condition of the equipment and agree to be charged for the replacement value of the equipment or costs of repair if not returned in working order at the end of the trip, excluding normal wear and tear.

I, _____ hereby declare that I have read and understood the above and agree to the terms and conditions declared hereon by placing my initials here:_____.

ASSUMPTION OF RISKS - PLEASE READ CAREFULLY

I _____ acknowledge that I have voluntarily applied to participate in the trip designated on this application (or a trip which I may subsequently transfer to). I understand that travel to the remote areas visited by this trip involves numerous risks and dangers including, but not limited to: the forces of nature; poorly maintained roads, trails, hotels, vehicles, or other means of conveyance which are not operated or maintained at standards common in developed countries; the absence of roads and marked trails in many remote areas; high altitude and extreme weather changes and conditions; injury or accident caused by domestic animals and wildlife; accident or illness where rapid evacuation may not be possible or available, and where medical facilities or medications may be absent, of poor quality, or inaccessible; inadequacy of medical attention; physical exertion or conditions for which I am not prepared; consumption of alcoholic beverages; participation in high risk activities or sports, or negligence (but not willful or fraudulent conduct) on the part of Mongolian Ways co., Ltd. or others. I acknowledge that I choose to participate in

adventure travel for the enjoyment and excitement derived in part from the inherent risks incurred by such travel and activity.

I hereby agree to be responsible for my own welfare, and accept any and all risks of delay, unanticipated events, accidents, illness, injury, emotional trauma, or death and verify this statement by placing my initials here:_____.

RELEASE OF LIABILITY - PLEASE READ CAREFULLY

I acknowledge that the cost of all Mongolian Ways Co., Ltd trips is based on all Trip Participants executing the above Acceptance of Terms and Conditions, Assumption of Risks and this Release of Liability. Therefore, as lawful consideration for being permitted to participate on such trip(s), I hereby release and discharge Mongolian Ways Co., Ltd and its agents and employees from and against any and all liability arising from my participation in the tour or expedition, or my use of any equipment or gear provided by Mongolian Ways Co. Ltd. for my use during the trip. I agree that this release shall be legally binding upon myself, all minors under the age of 18 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 Mongolian Ways Co., Ltd. from any and all liabilities to the maximum extend permitted by law.

I understand that all applications are subject to Acceptance by Mongolia Ways Co., Ltd, and upon acceptance shall be deemed to have been entered into and to be performed in Ulaanbaatar, Mongolia. 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 Ulaanbaatar, Mongolia with both parties splitting equally the costs of such mediator. If the dispute cannot be resolved through mediation then (b) the dispute shall be governed by Mongolian law; and (c) the maximum amount of recovery to which I will be entitled under any and all circumstances will be the land cost of my trip with Mongolian Ways Co., Ltd.

I have carefully read and fully understand the contents and legal ramifications of this agreement as well as all the conditions as stated in the trip description or under the heading "Book a Trip" on the Mongolian Ways website, especially noting those regarding cancellation and refund policies, limitation of liability, and responsibility borne by trip participants. I understand this is a legally binding and enforceable contract and I 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.

Signature of Applicant: _____ **Date (m/d/yyyy)** _____

Parent or guardian of a minor: I certify that I am the parent or legal guardian of the minor applicant named in the trip application. I agree individually and on behalf of my child to the terms above.

Name of parent/guardian: _____

Signature of Releaser: _____ **Date (m/d/yyyy)** _____