

2013 Kansas Archeology Training Program Field School

Registration Check List

This check list is a guide; it does not need to be submitted with the registration forms. Please use the forms in this part of the packet to register by May 1, 2013. (Note that registration fees increase after that date.) These forms may be printed, filled in by hand, and mailed **or** completed as a writable PDF, saved, and attached to an e-mail message.

Each participant must

- Fill out an Attendance Form.
- Sign and date the Participation Agreement.
- Sign and date the Legal Release.
- Fill out a Scheduling Form for each individual.

If you will be accompanied by one or more minor(s), who are not your own, you must

- Fill out a Sponsor Agreement and Medical Release for each minor and have each form notarized by a Notary Public.

The minor's parent or legal guardian must fill out the top part of the form. The unrelated sponsor (not the minor's legal guardian), must fill out the bottom half of the form. This form does not apply to parents who are accompanying their own children to the project.

Membership in KHF or the KAA is not mandatory, but the total enrollment cost is less if you do join. If you want to join one (or both) of these organizations

- Fill out the membership form(s) in this packet.

KAA name badges are optional. If you want one,

- Complete a name badge order form for each individual.

Final steps

- Calculate your fees. (See the Fee Calculation section on the last page of the packet.)
- Write a check or pay by credit card. **All fees (project fees, membership fees to KHF and/or KAA, KAA name badge purchase) should be combined into ONE payment by credit card or check, payable to the Kansas Historical Society.**
- Mail, e-mail, or fax completed forms and fees to:
Kansas Archeology Training Program
Kansas Historical Society
6425 SW 6th Ave.
Topeka, Kansas 66615-1099
E-mail: cultural_resources@kshs.org
Fax: 785-272-8682

Do not mail forms after May 22, but bring completed forms with you to check-in at KSHS headquarters.

Questions? Call Virginia Wulfkuhle at 785-272-8681, extension 266, or send her an e-mail message at vwulfkuhle@kshs.org. **If there are questions or communications for the KSHS archeology staff after May 31, please call the KSHS archeology cell phone at 785-580-7584.** Voice mail messages will be returned.



KHF MEMBERSHIP APPLICATION OR RENEWAL

I am a current member or am paying online (skip this form).

Membership in the Kansas Historical Foundation is open to all upon application. Each year members receive four issues of the journal (*Kansas History*) and four issues of the news magazine (*Reflections*) and enjoy free admission to the Kansas Museum of History and the state historic sites.

I am enclosing \$ _____ for my annual dues in the KHF.

Name: _____

Address: _____

City: _____ State: _____ 9 Digit Zip Code: _____ - _____

Check the type of membership desired:

_____ Individual \$40/1 year

_____ Household \$50/1 year

_____ Individual \$75/2 years

_____ Household \$95/2 years

Include this membership fee in one check, payable to the Kansas Historical Society, or pay by credit card, using the form included in this packet.

KAA MEMBERSHIP APPLICATION OR RENEWAL

I am a current member (skip this form).

I am buying this membership online or sending my registration forms by mail (fill out this form).

Membership in the Kansas Anthropological Association is open to all upon application. Each year the KAA publishes four issues of the *Newsletter* and one journal, *The Kansas Anthropologist*. Members also receive four issues of *Kansas Preservation*, the newsletter of the KSHS Cultural Resources Division. Annual events include an annual meeting in the spring and the Kansas Archeology Training Program field school.

I am enclosing: \$ _____ for my annual (January-December) dues in the Kansas Anthropological Association.

Name: _____ Phone: (____) ____ - _____

Address: _____

City: _____ State: _____ 9 Digit Zip Code: _____ - _____

Check the type of membership desired:

_____ Individual \$27

_____ Family (husband, wife, & children under 18) \$30

_____ Student (KATP only, no publications) \$5

Include this membership fee in one check, payable to the Kansas Historical Society, or pay by credit card, using the form included in this packet.

Attendance Form

2013 KANSAS ARCHEOLOGY TRAINING PROGRAM FIELD SCHOOL

Regular registration is due by **May 1, 2013**. The project fee increases if registration is postmarked after May 1. Fees will be refunded only if a cancellation request is postmarked by May 22. **Do not mail registration forms after May 22**; bring them with you to the project.

Membership in the Kansas Anthropological Association (KAA) and/or the Kansas Historical Foundation (KHF) allows you to register for a fee of \$20 per person by May 1 or \$30 after May 1. If you are not a current paid member, please enclose a completed membership application with applicable fees along with this registration form. If you do not wish to join the KAA or KHF, the project fee is \$80 per person by May 1 or \$90 after May 1.

An individual under 18 years of age unaccompanied by parent or guardian must be a member and have an adult member sponsor. A sponsor agreement must be completed, notarized, and included with this form.

Check here if first-time participant.

Name: _____

Street Address: _____

City: _____ State: _____ 9-Digit Zip Code: _____ - _____

Telephone: (____) ____ - ____ E-mail address: _____

Will you be attending with other family members? If yes, please list.

Name	Relationship	Age (if under 18 years old)

Vehicle make and model: _____ Color: _____ Tag number: _____

Lodging: Camping, Where? _____

Motel, Where? _____

Other, Where? _____

Emergency contact person: _____

Address: _____ Telephone: (____) ____ - ____

Personal physician: _____ Telephone: (____) ____ - ____

Participation Agreement (required for registration)

Individually and on behalf of any family members and sponsored minors attending the Kansas Archeology Training Program (KATP) with me, I hereby pledge and agree:

To respect the rights of other participants, keep the camping area clean, and avoid disturbing other campers. To abide by the rules and codes of conduct of the KATP, to obey the instructions of the directors and other officials of the KATP, and to perform such archeological work and camp chores assigned to me/us by project officials. To care for and turn in all equipment, records, and supplies that do not belong to me/us; to collect and excavate archeological materials only when and where instructed by project officials; to keep records and controls on all archeological work; and to turn in all artifacts. To abide by the terms and conditions of all Kansas laws applicable to archeology and historic preservation.

I HAVE READ THE ABOVE AND AGREE TO ALL ITEMS:

Signature _____

Print name _____

Date _____

Legal Release (required for registration)

I hereby release the Kansas Historical Society, the Kansas Anthropological Association, and the property owners from any and all liability for the safety and well-being of me or members of my family while attending the 2013 Kansas Archeology Training Program field school. I/We will respect the rights and property of landowners and will not damage or destroy public or private property.

I approve the use by KAA and KSHS of any photographs of me or members of my family taken by the official photographers during scheduled activities for use in publications or publicity and promotional projects.

I HAVE READ THE ABOVE AND AGREE TO ALL ITEMS:

Signature _____

Print name _____

Date _____

If you have the means to add a digital signature, you may do so. Otherwise, fill out the documents, print, physically sign, and either mail, scan and e-mail, or fax them to the KSHS.

Sponsor Agreement and Medical Release
2013 KANSAS ARCHEOLOGY TRAINING PROGRAM FIELD SCHOOL

This form is required for persons under 18 years of age, unaccompanied by a parent or legal guardian. It must be completed, notarized, and included with the registration form.

TO BE COMPLETED BY PARENT OR LEGAL GUARDIAN:

I, _____, parent or guardian of
_____, a minor, hereby release said minor while he/she is attending the 2013 Kansas Archeology Training Program field school. I hereby appoint _____ as the adult sponsor for this minor. The sponsor has agreed to assume this responsibility. In the event of an emergency, the sponsor named here has my permission to obtain medical treatment for said minor at the nearest hospital or doctor's office, at my expense, if our own doctor is not readily available.

Subscribed and sworn before me this _____ day of _____, 2013.

Signature of parent or guardian

Notary Public in and for the State of _____

TO BE COMPLETED BY THE SPONSOR:

I, _____ have been appointed adult sponsor of
_____, a minor, by his/her parent or guardian,
_____. I hereby agree to this appointment and further agree to assume the responsibility of said minor at the 2013 Kansas Archeology Training Program field school.

Subscribed and sworn before me this _____ day of _____, 2013.

Signature of sponsor

Notary Public in and for the State of _____

Fee Calculation

All fees (project fees, membership fees to KHF and/or KAA, KAA name badge purchase) should be combined into **ONE** payment by credit card or check, payable to the Kansas Historical Society. To pay online: Go to store.kshs.org; add all items to your cart (all items are located under "Services" except KHF memberships, which are located under "Memberships"); pay in one transaction.

Membership fees

Kansas Anthropological Association \$ _____
and/or
Kansas Historical Foundation \$ _____

Project Fees

Member of KAA and/or KHF (check either or both)
\$20/person (by May 1) number of people on registration form: ____ \$ _____
or
\$30/person (after May 1) number of people on registration form: ____ \$ _____
Non-member
\$80/person (by May 1) number of people on registration form: ____ \$ _____
or
\$90/person (after May 1) number of people on registration form: ____ \$ _____
Number of KAA name badge(s) ____ at \$6 each \$ _____

Total: \$ _____

Credit Card Form

Skip this form if you are paying by check or online at store.kshs.org. For security reasons, **this form should not be sent as an e-mail attachment**. If paying by regular mail or fax, complete this form, and the appropriate fee will be charged upon receipt.

Type of credit card Visa MasterCard Discover

Name as it appears on credit card _____

Telephone number _____

Credit card number _____ Card expiration date _____

Authorized signature _____

Billing address of card holder _____

E-mail address _____

Amount to be charged _____

Office Use Only Date received _____ Date payment processed _____