

Cetacean Sanctuary Research

Program of Citizen Science
on cetaceans of the
Pelagos Sanctuary

Ligurian Sea, Italy

Registration form for minors

Istituto Tethys ONLUS
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<https://www.tethys.org>
<https://whalesanddolphins.tethys.org>

PLEASE READ CAREFULLY

- PLEASE FILL IN ALL THE FORMS BELOW (one form must be completed for each participant);
- IF YOU HAVE PAID BY BANK TRANSFER please attach THE RECEIPT OF PAYMENT to these forms. If the bank account from which the payment was made is not in the name of the participant, please specify the name of the participant in the reason for payment.
- IF YOU REQUIRE A STUDENT DISCOUNT, please provide a copy of a university document (such as a valid student card).

TETHYS WILL CONTACT YOU AS SOON AS POSSIBLE TO CONFIRM RECEIPT OF THE COMPLETED FORMS

CONTACTS

Milan Office

For information and reservations call (+39) 02 72001947 or write to the e-mail address: istituto.tethys@gmail.com

Open from 2:00 p.m. to 5:00 p.m. Monday, Wednesday and Friday from October to December

Open from 2:00 p.m. to 5:00 p.m. Monday to Friday from January to September

ENTRY FORM – CETACEAN SANCTUARY RESEARCH

PLEASE WRITE IN CAPITAL LETTERS

To be completed by the parents or legal representative of the minor.

I/we booked a place for the minor _____

in the search cruise CSR no. _____ from _____ (DD/MM/YYYY) to _____ and

the following donation has been made: _____ Euro

Method of payment to the Tethys ONLUS Institute:

Payment by **bank transfer in Euro** to the account in the name of "Istituto Tethys ONLUS" (attaching a copy of the payment receipt, bank charges at my expense).

Payment by **credit card**.

Participant details:

LAST AND FIRST NAME OF THE MINOR _____

ADDRESS _____ ZIP CODE _____

CITY _____ PROVINCE _____ COUNTRY _____

TEL _____ / _____ MOBILE _____

DATE OF BIRTH ____ / ____ / ____ PLACE OF BIRTH _____

Details of parents or legal representative:

LAST NAME _____ NAME _____

ADDRESS _____ ZIP CODE _____

CITY _____ PROVINCE _____ COUNTRY _____

TAX CODE _____

EMAIL _____

parent

guardian/legal representative

and

LAST NAME _____ NAME _____

ADDRESS _____ ZIP CODE _____

CITY _____ PROVINCE _____ COUNTRY _____

TAX CODE _____

EMAIL _____

parent

guardian/legal representative

TERMS AND CONDITIONS – CETACEAN SANCTUARY RESEARCH

We note that 20% of the entire donation is non-refundable. In the event of cancellation with a written notice of at least 30 (thirty) days from the start date of the shift/departure date, we will refund an amount equal to the difference between the above percentage of 20% and the amount paid. For cancellations received within 30 days prior to the start date of the shift/departure date, the paid participation fee is not refundable.

We also note the following provisions:

1. in the event of research involving a minimum number of participants, if this number is not reached, or
2. in the event of cancellation of an entire shift for technical reasons

the Tethys ONLUS Institute will refund the full amount paid or add the participants to other shifts or projects available subject to their agreement (no other forms of compensation will be provided).

Signature _____ Date _____

Signature _____ Date _____

DISCHARGE OF LIABILITY – CETACEAN SANCTUARY RESEARCH

The undersigned, as parents or legal guardian/representative of the minor _____, authorise and consent to the participation of the above minor in the search cruise Tethys CSR n. _____ from _____ to _____ and acknowledge that the attached Co-Responsibility Agreement is entered into at the same time as this participation form.

TO THIS END, THE UNDERSIGNED DECLARE:

- a. to have reviewed the program of the cruise/Tethys research project, as well as the rules of behaviour that the minor will be required to observe;
- b. that the minor is physically and mentally able to participate safely in the activities described in the informative document in the section "Conditions of participation" and to have reported any problems at the time of registration and to communicate these again to the person responsible for the research once arrived at the base of research;
- c. to be aware of the research program and to have read the information document and the section "Conditions of participation" and to be aware that this program is always susceptible to variations due to climatic, technical and force majeure causes;
- d. to assume full personal responsibility, both civil and criminal, for any event and/or harmful consequences arising from the actions of the minor such as, inter alia, accidents (including death), temporary or permanent invalidity, injuries or diseases, complaints, losses, damage, which may occur in reference to, during and after the activity in question and the research trip;
- e. to authorise the Tethys Institute to provide, in case of necessity and urgency, the necessary medical care, and to agree from now on to reimburse the relevant costs incurred upon request;
- f. to delegate the skipper of the vessel as the person responsible for the minor during the carrying out of the research activities on board the vessel;
- g. that the minor has been fully informed by the undersigned of the modalities, indications and instructions relating to the search journey, has understood them and undertakes to strictly comply with the provisions provided by the accompanying persons and the Tethys Institute, and that the minor is aware that in the event of a breach of the provisions, in particular during the sailing and night periods, liability for accidents or damage to property or third parties shall be borne solely by himself/herself.

THE UNDERSIGNED ALSO EXEMPT:

- a. the Tethys Institute and the accompanying persons, including the skipper, from any responsibility for initiatives taken by the minor outside the instructions given by the skipper and/or the accompanying persons;
- b. the Tethys Institute from any responsibility for any consequences resulting from the minor leaving the vessel without authorisation and/or, the minor leaving the assigned bunk/accommodation during the hours of night rest;
- c. the Tethys Institute from liability for injury or loss to the minor, persons or things caused by the minor's misconduct or by accidental events;
- d. the accompanying persons from all responsibility for events resulting from the possible bad behaviour of the minor and assume responsibility for any damage caused by him/her, individually or in a group;
- e. the Tethys Institute, the skipper, the researchers, the accompanying persons, the external experts and the coordinators, the collaborators of the Institute, the volunteers and all others responsible for the realisation of the research program, from any and all responsibility regarding the minor and his/her property, expressly and irrevocably renouncing all rights, actions or claims and undertaking from now on the obligation of compensation for any damages to anyone or anything caused by the conduct of the minor and in the knowledge that this exemption of liability includes any claim for damages arising from the conduct or omissions of the Tethys Institute, subject to the assumptions provided for in Article 1229 of the Civil Code;
- f. the accompanying persons/organisers from all responsibility for any accidents or injuries related to the performance of the activities and therefore exempt the Tethys Institute from all responsibilities that may arise as a result of participation in the project and in the carrying out of the activity in question, for any damage that may have been suffered by himself/herself or caused to third parties.

Signature _____ Date _____

Signature _____ Date _____

We also state that we are aware that our child will share confined spaces with other people and of the nature of the activities that will be carried out there and reserve the right to refuse participation in such activities at any time if we believe that such activities do not provide sufficient safety measures. This right may be exercised by the undersigned even in case of disapproval of vehicles or vessels used for the activities. If we refuse participation to the activities or decide the minor must leave the place of research, we shall not be entitled to any compensation. The undersigned hereby releases the Tethys Institute ONLUS, Viale G.B. Gadio 2, 20121 Milan, Italy, its legal representatives, all associates and research logistics managers from any liability resulting from any inconvenience, accident or illness which may have occurred during participation in the activities in question.

For any dispute concerning and/or arising from the interpretation, application and execution of this contract, the Court of Milan shall have exclusive jurisdiction.

Signature _____ Date _____

Signature _____ Date _____

We authorise the Tethys Institute ONLUS, with its registered office in Milan, Viale G.B. Gadio 2, to use our child's data only for the purposes of accounting and statistical processing. We also authorise the Tethys Institute ONLUS to insert us in its address book to receive information regarding the activities of the Institute. Personal data will be processed in accordance with Regulation (EU) 2016/679. The data processor: Tethys Institute ONLUS with registered office in Milan, Viale G.B. Gadio 2.

Signature _____ Date _____

Signature _____ Date _____

We authorise the Tethys Institute ONLUS and/or its successors to use any still or moving images, as well as the name of the minor, and to make audio and video recordings, photographs and the like that portray the child during the participation in the research program, providing our consent to their publication on program communication materials

and on Internet websites and social media sites connected to the Institute and in general to use the above material for the production of documentaries and other material with documentary, educational and informative purposes and for Institute communication activities, relieving the Institute from any responsibility inherent to the misuse by third parties of the above images. The present authorisation does not allow the use of the images in contexts which compromise the personal dignity of the minor and in any case for use and/or purposes other than those indicated above. The undersigned confirm that they have nothing to claim for the above and irrevocably waive any right, action or claim arising from the above.

Signature _____ Date _____

Signature _____ Date _____

We acknowledge that we have read and understood all the information contained in the “CSR_info_ita” document and agree to it.

Signature _____ Date _____

Signature _____ Date _____

Mark with X if you do NOT wish to receive information on the activities and offers of the Tethys Institute ONLUS.

Mark with X if you do NOT want the images that take up the research or institutional activities in which your child appears to be used by the Tethys Institute ONLUS.

we expressly authorise the Tethys Institute and accompanying persons to allow the minor, when the boat is docked in port, to leave the boat by himself/herself and to remain in the perimeter of the port of the marina of Portosole once the research activities have been completed and notwithstanding the return on board during the hours communicated from time to time, without the presence of the accompanying persons.

We are aware that the accompanying persons and skipper are not responsible for the minor when he/she leaves the boat.

YES

NO

Signature _____ Date _____

Signature _____ Date _____

we expressly authorise the Tethys Institute and its accompanying persons to allow the minor, when the boat is docked in port, to leave the boat by himself/herself and go outside the perimeter of the port of the marina of Portosole once the research activities have been completed and notwithstanding the return on board during the hours communicated from time to time, without the presence of the accompanying persons.

We are aware that the accompanying persons and skipper are not responsible for the minor when he/she leaves the boat.

YES

NO

Signature _____ Date _____

Signature _____

Date _____

We authorise the minor, when the boat is docked in the port, to leave the boat and to go outside the perimeter of the port of docking when accompanied by the accompanying persons.

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YES

NO

Signature _____

Date _____

Signature _____

Date _____

CONTACT NUMBERS IN CASE OF EMERGENCY

In case of emergency please indicate **at least** two emergency numbers and relationship to the minor of persons you wish to be contacted by telephone.

1. Name and Surname

Relationship

Phone
number(s)

2. Name and Surname

Relationship

Phone
number(s)

3) Name and Surname

Relationship

Phone
number(s)

4) Name and surname

Relationship

Phone
number(s)

DIETARY REQUIREMENTS

(Name and Surname of Participant)

In order to meet the dietary requirements of all people on board, which may be related to cultural traditions, health problems or personal choices, please fill in the following questionnaire.

PLEASE WRITE IN **CAPITAL LETTERS** OR PLACE AN X WHERE REQUIRED

Are you vegetarian? Yes No

Are you vegan? Yes No

Special dietary requirements:

Allergies: Yes No

Details: _____

Intolerances Yes No

Details: _____

HOW DID YOU HEAR ABOUT US?

- Google/other search engines (*please specify **search keywords** used*)

Other websites/online articles/blogs (*please specify*)

- Facebook (Tethys Research Institute, Tethys Research cruises for UNI students, other)

- Twitter

- YouTube/ Vimeo

- Flickr

- Newsletter via email

- Word of mouth

Newspapers/magazines (*please specify*)

Radio/television (*please specify*)

- Directly from travel agency (*please specify*) _____

- Other sources (*please specify*) _____

- Unsure

- Notes/comments
