Saturday, January 31, 2009 SOLD OUT

Contact us if you would be interested in an identical tour on

Sunday, February 1, 2009

(The February date is **tentative** depending on if there is enough interest to fill an additional bus)

It's Our Fault!

Southern California San Andreas Geology Tour

Led by Dr. Donald Prothero, this day trip will explore the San Andreas fault from Palmdale to the Devil's Punchbowl, and see its effects on the entire region, including Vasquez Rocks. After a hike (optional) and picnic lunch at the Devil's Punchbowl State Park, we will drive over the top of the San Gabriel Mountains examining the evidence of their origin and evolution over 1.7 billion years. We will see remnants of giant billion-year-old magma chambers, and the products of rapid erosion of one of the fastest-rising mountain ranges in the world. The \$99. fee for the tour includes: a \$30. tax deductible donation to the Skeptics Society, transportation by bus, lectures, a guide booklet, lunch, and park entrance fee.

Seats are limited, so make your reservations soon!



TINERARY

SAN ANDREAS GEOLOGY TOUR

Saturday. January 31, 2009 (sold out) Sanday, February 1, 2009 (tentative)

8:00 a.m. Load bus at Westin Hotel in Pasadena The Westin Pasadena 191 North Los Robles Pasadena, CA 91101 Phone: (626) 792-2727 You may leave your car in the Westin parking garage. There is an extra fee.

12:00 p.m. Lunch and Geology Discussion (lunch and guide book provided with tour price)

5:00 p.m. Return to Westin Hotel in Pasadena

SATURDAY, FEBRUARY 1, 2009 (tentative) • It's Our Fault! Southern California Geology Tour REGISTRATION FORM

me		
dress	city	zip
one	email	
number of participant JMBER OF LUNCHES payment by check	ts @ \$99. each PAYMEN	IT TOTAL\$
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Charge my: MASTERCARD	VISA EXPIRATION DATE Month Year	
Charge my: MASTERCARD Account No.		
	Month Year	VISA ® MasterCard ®

CANCELLATION POLICY: Before January 15: \$30 donation is not refundable, full refund of the rest of the fee. After January 15: no refund. Send completed registration along with medical and legal waivers to: Skeptics Society Geology Tour, P.O. Box.338, Altadena, CA 91001. Or fax to: 626/794-1301. Or phone us at 626/794-3119.

February 1, 2009 (tentative) *It's Our Fault!*Southern California San Andreas Geology Tour

SKEPTICS SOCIETY PARTICIPANT RELEASE AND WAIVER

(All participants must complete this form for high-risk activity trips. i.e. hiking, rock climbing, desert/beach trips, etc.)

1. I AM AWARE OF THE RISKS OF CHOOSING TO PARTICIPATE IN THIS ACTIVITY. I ASSUME AND ACCEPT THE RESPONSIBILITY FOR THESE RISKS:

I am aware that participating in the geology tour on January 31, 2009 involves risks of personal injury, property damage and other associated risks. The activity has been explained to me, including the risks involved in participating in this activity, and I understand these risks.

I voluntarily agree to participate in this activity. I freely agree to assume and take upon myself, full responsibility for any such risks of loss, property damage or personal injury, including death, that may be sustained by me as a result of participating in this activity whether caused by the negligence of the Skeptics Society or otherwise.

2. I PROMISE NOT TO SUE THE SKEPTICS SOCIETY OR THE TRIP LEADERS DONALD PROTHERO AND TERESA LEVELLE FOR ANY INJURIES OCCURRING WHILE I AM PARTICIPATING IN THIS ACTIVITY:

In consideration of the Society's efforts in making this educational trip available and my being allowed to participate, I hereby agree to release, indemnify, hold harmless and forever discharge the Skeptics Society, its directors, officers, employees, editorial/advisory board and agents, as well as the trip leaders Donald Prothero and Teresa LeVelle, from any and all claims and causes of action which might be brought by me or my parents or dependents on my behalf for loss of property, personal injury or death sustained by me arising out of any travel or activity conducted during the period of my participation in the above named activity. I understand that this release covers liability claims and actions caused entirely or in part by any acts or failures to act of the Skeptics Society (or its directors, officers, employees, editorial/advisory board and agents), Donald Prothero or Teresa LeVelle including but not limited to negligence, mistake or failure to supervise by the Society or tour leaders.

3. I WILL REIMBURSE THE SKEPTICS SOCIETY OR THE TRIP LEADERS DONALD PROTHERO AND TERESA LEVELLE FOR ANY COSTS IT INCURS DUE TO INJURY OR DAMAGE RESULTING FROM MY PARTICIPATION IN THIS ACTIVITY:

I agree to indemnify the Skeptics Society, Donald Prothero or Teresa LeVelle for any loss or costs, including medical bills, court costs and attorneys' fees that it might incur due to injury or damage resulting from my participation in this activity.

4. THIS AGREEMENT WILL ALSO PREVENT MY FAMILY FROM SUING THE SKEPTICS SOCIETY OR THE TRIP LEADERS DONALD PROTHERO AND TERESA LEVELLE:

It is my intent that this Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns, and personal representative, if I am deceased. This Agreement shall be deemed as a release and consent not to sue regarding any claims these parties may have against the Skeptics Society or the trip leaders Donald Prothero and Teresa LeVelle relating to my participation in this activity.

5. This Agreement shall be construed in accordance with the laws of the State of California. In signing this Agreement, I acknowledge that I have read it and understand it, I agree to be legally bound by it and that I sign it voluntarily.

IF PARTICIPANT IS UNDER EIGHTEEN (18) YEARS OF AGE, THE SIGNATURE OF A PARENT OR LEGAL

Participant's Signature Date Printed Name Parent/Guardian Signature Date Printed Name

Please return this completed form to: Skeptics Society, P.O. Box 338. Altadena, CA 91001

February 1, 2009 (tentative) *It's Our Fault!*Southern California San Andreas Geology Tour

SKEPTICS SOCIETY

PARTICIPANT MEDICAL INFORMATION FORM

(All participants must complete this form for high-risk activity trips. i.e. hiking, rock climbing, desert/beach trips, etc.)

Participant's Name	Birth Date	
Insurance Provider	Insurance Telephone	
Insurance Address	Date	
Doctor's Name	Doctor's Telephone	
Contact Person (in case of emergency)	Contact Person's Telephone	

Please return this completed form ALONG WITH A COPY OF YOUR INSURANCE CARD to: Skeptics Society, P.O. Box 338. Altadena, CA 91001

YOUR TRIP REGISTRATION WILL NOT BE COMPLETED WITHOUT THIS FORM