



Georgia Appalachian Trail Club  
presents the  
Leave No Trace - Trainer Course

November 9 - 10, 2019  
February 22 - 23, 2020

Appalachian Trail in North Georgia



Dear Leave No Trace Student:

On behalf of the Georgia Appalachian Trail Club (GATC), thank you for your interest in participating in a Leave No Trace Trainer Course in north Georgia. We are pleased to be affiliated with Leave No Trace Center for Outdoor Ethics and serve as a resource to you for your training needs.

Title: Leave No Trace Trainer Course  
Dates: November 9 - 10, 2019  
February 22 - 23, 2020  
Location: Near Blairsville GA on the Appalachian Trail  
Times: Class begins at 9:00 am on Saturday ending by 4:00pm the next day  
There is a "soft" start Friday evening  
Costs: \$40.00 includes materials  
Certification: Yes

The program starts at 9:00 a.m. on Saturday. You can join me the night before for a camp out and conversation. With your confirmation you will receive the location of the trail head.

Please be prepared to backpack a few miles and camp out for the night. It is necessary that you have sufficient food and equipment, we have limited extra camping gear. If you do not have all the gear on the Back Country Check list let me know, arrangements might be available. **Food is not provided.**

To complete your registration, return the attached forms, including; your two Registration Forms, Health Form, GATC Release, and LEAVE NO TRACE Release. I will confirm that this course is running no less than 30 days before the start date – at that time, please feel free to make travel plans

Send all paperwork (**pages 5 - 10**) and your check, payable to "Georgia Appalachian Trail Club", for the registration to:

Jay M Dement  
GEORGIA APPALACHIAN TRAIL CLUB  
1740 Patriots Way  
Kennesaw GA 30152  
404/731-1901  
jay@jayDphotos.com

Thank you for your interest in Leave No Trace Trainer Course.

Yours truly,

Jay M. Dement  
LEAVE NO TRACE Master Educator



## Leave No Trace Trainer Course Expectations



Please Note: The Trainer Course is not designed to provide instruction on backcountry living skills. The backcountry aspect of the experience is meant to provide relevance to the curriculum, through practicing Leave No Trace techniques and methods, observing examples of impact, and creating an awareness of use and its purposes. The course itinerary is very full, and does not allow time for teaching how to light stoves, cook, purify water, and set up tents, for example. It is assumed that participants come with a level of comfort for living in a backcountry setting, and with all their own gear. If you feel that you would require instruction in any of these backcountry living skills, please contact me to discuss your goals and alternatives available to you.

### **Itinerary:**

This course will run rain or shine, so be prepared for whatever weather we could encounter. You will be responsible for providing your own gear for camping and cooking. You will need to leave room to pack your share of any group gear.

### **Release/Assumption of Risk:**

All participants will be asked to read and sign a release acknowledging the inherent risks that are involved in any outdoor adventure activities. Minors will have a parent or guardian sign on their behalf, and must attend with an adult

### **Eligibility:**

Participants must be of sound health and able to walk 6-8 miles a day. Although our trips are designed to travel at a leisurely pace and much of the day is occupied with classroom and practical time, this request serves to mark an appropriate level of physical fitness.

### **Deposits and Refunds:**

1. 50% tuition deposit required to hold a spot in a course.
2. Full course payment due 30 days before course start.
3. Registration within 30 days of course start requires full tuition at registration.
4. If student cancels: More than 30 days prior to course start, funds paid minus \$35 admin fee is refundable or transferable. Within 30 days prior to course start, 50% of tuition is transferable, the remainder is forfeited.
5. If course cancels due to low enrollment, funds paid are transferable or 100% refundable.

In a Backcountry Classroom setting, each person will be responsible for helping out as an active part in the group's everyday camping tasks including: cooking, cleaning, equipment set up and break down, water purification, etc. Living with other people in close conditions requires practice in understanding and tolerance. All participants should be prepared to work within the group's dynamics.

**Travel To and From Site:** Each participant is responsible for getting to and from the trail head start of the course.

**Pets:**

Please leave your animal companions at home. Due to allergies and preferences of other people in your course and neighbor relations, it is inappropriate to bring them. No animal will be tied outside of a vehicle or kept inside of a vehicle during our courses. If you do arrive with an animal we will direct you toward a kennel for the duration of your course. If this is unacceptable, we will ask that you disenroll in the course.

**Harassment:**

Absolutely no harassment of any kind will be tolerated by students, staff, or administrators during courses and after course hours. It is your responsibility to report any misconduct to the course leader. If you are suspected of harassing others you will be asked to leave, and your tuition will not be refunded.

**Teaching:**

The main objective of this program is to prepare participants to "Train" others in the Leave No Trace principles. Each participant will have the opportunity to present a principle to the group. This supported manner insures a more positive experience.

**Friday Night:**

For those arriving early we will meet Friday night for some socializing before the program. All expenses, and food, will be your responsibility.

## Agenda

**Day One**

Welcome  
 Introduction to the Trainer Course  
 Gear Pack-out  
 Principles of Education  
 Principle 1: Plan Ahead and Prepare  
 Hike-in  
 Lunch  
 Principle 2: Travel and Camp on Durable Surfaces  
 Set-up Camp  
 Principle 3: Dispose of Waste properly  
 Dinner  
 Discussion of Action plans

**Day Two**

Breakfast  
 Principle 4: Leave what you Find  
 Principle 5: Minimize Campfire Impacts  
 Break-Camp and evaluate impact, start hike out  
 Principle 6: Be Considerate of Other Visitors  
 Principle 7: Respect Wildlife  
 Discuss Wilderness Ethics  
 Share and discuss Action Plans  
 Closing

## Personal Back-Country Checklist

Please remember as you pack that you will need to save room for your share of the group gear, kitchen gear, and food! Pack small and light, beware of redundancy!

IMPORTANT – This list is just basic personal items and is not meant to be comprehensive

- \_\_\_\_\_ 2 sets of clothes suitable for the time of year (one to hike, one to wear clean).
- \_\_\_\_\_ sun screen, SPF 15+ is best.
- \_\_\_\_\_ a hat to keep the sun off or a hat to keep the heat in depending upon time of year.
- \_\_\_\_\_ a set of synthetic long underwear (poly pro, thermax, polarmax).
- \_\_\_\_\_ 2 one-quart water bottles, empty gatorade bottles or Nalgene bottles are good.
- \_\_\_\_\_ a rain jacket and rain pants or poncho.
- \_\_\_\_\_ an insulating layer jacket, compact and synthetic (fleece is ideal).
- \_\_\_\_\_ a pair of boots or all-terrain shoes for hiking that have good tread and offer support.
- \_\_\_\_\_ a pair of comfortable closed-toed shoes (no sandals) to wear around camp, and that can get wet.
- \_\_\_\_\_ 2 sets of wool or synthetic socks for daily hiking, with sock liners if preferred.
- \_\_\_\_\_ 1 set of socks (synthetic or wool) for sleeping in addition to your daily wear socks.
- \_\_\_\_\_ a hand towel, and your personal hygiene stuff (tooth brush, paste, comb, etc).
- \_\_\_\_\_ a plastic mug, bowl, and spoon, fork, knife
- \_\_\_\_\_ a foam pad or small air mattress for sleeping (thermarest, ridgerest, ensolite pad).
- \_\_\_\_\_ a sleeping bag with a rating appropriate for the time of year. It should come in a stuff sack lined with a plastic garbage bag.
- \_\_\_\_\_ a frame pack with hip belt (internal or external frame) lined with a plastic bag.
- \_\_\_\_\_ a flash light or headlamp with extra batteries.
- \_\_\_\_\_ a camera/notebook/pen or pencil.
- \_\_\_\_\_ any medications, inhaler, bee sting kit, or other personal items that you would normally have with you.
- \_\_\_\_\_ a cook set, pots, pans, stove, implements
- \_\_\_\_\_ a tent, tarp, hammock

Please pack all these items in Ziplocs to keep them dry and clean (2 gal bags are great). Bring a couple of extra zip locks and heavy-duty trash bags.

PLEASE AVOID: Tape players and other "urban" electrical devices, Hunting knives (less than 3", please), Firearms, Fireworks, etc.

# REGISTRATION FORM

Course Title: Leave No Trace Trainer Course

Dates:  November 9 - 10, 2019  
 February 22 - 23, 2020

**IMPORTANT:** Please return this completed form along with your Deposit, Health Form and Releases at least 30 days prior to your course to the. This information is confidential and will be used in the event that we need to contact you with questions, course changes or cancellations, and other related information.

Name	Email
Address	Trail Club
City, State, Zip	Emergency Contact
Phone	Contact Phone

Please answer the following questions as accurately as possible. The information provided here will help us best prepare for your backcountry experience, providing us with the information we need to plan a group menu and the route length, difficulty, and duration.

Physical Fitness:

- How would you describe your level of activity?
- I spend a lot of time at my desk
- I am on my feet and moving most of the day
- I work outdoors
- I am an athlete in training

Describe your regular physical activities, how often you do them, and to what duration or length:

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Check the outdoor gear you own and use:

- |   |   |
|---|---|
| <input type="checkbox"/> Framepack            | <input type="checkbox"/> Trail shoes or boots (broken to your foot) |
| <input type="checkbox"/> Rain jacket          | <input type="checkbox"/> Water filter or purifier                   |
| <input type="checkbox"/> Sleeping bag and pad | <input type="checkbox"/> Headlamp, extra batteries                  |
| <input type="checkbox"/> Camp stove/Cook kit  | <input type="checkbox"/> Shelter (tarp or tent)                     |

Student Agreement:

I have read, understand, and agree to abide by all GATC policies, as outlined and referenced through this document, while I am enrolled in any base course.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please send your registration paperwork to:  
Jay M Dement  
GEORGIA APPALACHIAN TRAIL CLUB  
1740 Patriots Way  
Kennesaw GA 30152

# Health Form

## Disclosure

Georgia Appalachian Trail Club (GATC) programs involve a variety of activities including warm-ups, games, and group initiative problems. Some programs may also include other rigorous physical adventure activities such as backpacking, climbing, swimming, or hiking. These activities are designed to be within the limits of a person who is in reasonable good health. The level of participation in all programs and activities is at all times completely up to the individual.

Safety is a high priority in all programs. In addition, each participant must assume the risk that he or she may suffer an emotional or physical injury and disability. Each participant must have health/accident insurance coverage. The information requested on this form is intended to help alert staff to pre-existing medical conditions. This information will be held in confidence. Please complete the form below and bring it with you on the day of your scheduled program.

## General & Medical Information

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Do you have health/medical insurance? no/yes Name Company: \_\_\_\_\_

Do you have any limiting physical or health disabilities - temporary or permanent - that you or your doctor feel would limit your participation in a GATC Services activity? ..... no /yes

Do you have any chronic or recurring injuries? ..... no /yes

Are you currently taking any medication? ..... no/ yes

Do you have any allergies or reactions to any medications, plants, or insects? ..... no /yes

Have you had surgery in the past year for any condition which may limit your participation? ..... no /yes

Do you have asthma? ..... no /yes

Do you have diabetes. .... no /yes

If yes to any of the above, please explain/describe:

Are you pregnant? no/yes

Do you have or do you have a history of:

\_\_\_\_\_ High blood pressure \_\_\_\_\_ currently on medication for high blood pressure

\_\_\_\_\_ Heart palpitations \_\_\_\_\_ chest pain or pressure \_\_\_\_\_ stroke

\_\_\_\_\_ Heart attack \_\_\_\_\_ heart disease \_\_\_\_\_ heart murmur

If yes to any of the above, please explain/describe:

Please list any other concerns or conditions that may affect your participation:

We strongly recommend that you consult your physician or midwife if you are pregnant or have checked off any of the conditions above before participation in GATC Services activities.

Signature of Participant \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

## PARTICIPANT AGREEMENT, RELEASE, AND ASSUMPTION OF RISK

In consideration of the services of Georgia Appalachian Trail Club (GATC), their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "GATC"), I hereby agree to release, indemnify, and discharge GATC, on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that my participation in hiking, camping, backpacking, caving and/or individual and group initiatives, problem solving exercises and personal or professional growth and development training, entails known and unanticipated risks that could result in physical or emotional injury or death. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

**The risks may include, among other things:** Strenuous physical activity; slipping and falling; pinches, scrapes, twists and jolts; sprains, strains, broken bones; collision with fixed or movable objects; weather conditions; falling objects; water hazards; exhaustion; exposure to temperature and weather extremes which could cause hypothermia, hyperthermia (heat related illnesses), heat exhaustion, sunburn, dehydration; and exposure to potentially dangerous wild animals, insect bites, and hazardous plant life; rope burns; being struck by rock fall or other objects dislodged or thrown from above; equipment failure; and improper lifting or carrying; my own physical condition, and the physical exertion associated with this activity; the condition of roads, terrain, or highways and accidents connected with their use; other participants' and/or my own negligence; and emotional stress.

Furthermore, GATC facilitators have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They may give inadequate warnings or instructions, and the equipment being used might malfunction.

2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.

**CHALLENGE BY CHOICE:** GATC programs are composed of activities that may be unfamiliar to participants. To insure participants' control over their own personal safety, we have adopted the philosophy of "Challenge by Choice". At all times, participants in activities are completely in control of their own level of participation. During our programs participants need only to do or attempt to do those things that they choose. I (the "Participant") must:

- i) Listen carefully to all instructions and briefing;
- ii) Set my own goals in relation to the group's goals;
- iii) Make a decision as to my level of participation; and
- iv) Inform others of my choice.

No one will force me to do anything – the choice is clearly my own. During the program, GATC facilitators will provide a challenging setting in which I may expand my limits while supporting my personal boundaries.

3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless GATC from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of GATC's equipment or facilities.

4. Should GATC or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.

5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while par-

icipating, or else I agree to bear the costs of such injury or damage myself. I understand that GATC does not provide health insurance for students of their courses. I further certify that I am willing to assume the risk of any medical or physical condition I may have.

6. In the event that I file a lawsuit against GATC, I agree to do so solely in the state of Georgia, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I further agree that the place of this release, its situs and forum, will be Cobb County, Georgia, and it is said county and state for all matters whether sounding contract or tort relating to the validity, construction interpretation, and enforcement of this release be determined. 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.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against GATC on the basis of any claim from which I have released them herein. I also acknowledge that I have fully satisfied myself as to the nature of the activity or activities in which I will be participating, the risks associated with each such activity, the concept of "Challenge by Choice", and my responsibility to know my own limits. In the event of illness or injury, consent is hereby given to provide emergency medical care, hospitalization, or other treatment that may become necessary.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

Signature of Participant \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

**PARENT'S OR GUARDIAN'S ADDITIONAL INDEMNIFICATION**  
**(Must be completed for participants under the age of 18)**

In consideration of \_\_\_\_\_ (print minor's name) ("Minor") being permitted by GATC to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless GATC from any and all Claims which are brought by, or on behalf of Minor, and which are in any way connected with such use or participation by Minor.

Parent or Guardian:

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

**PHOTO / MEDIA RELEASE**

I grant GATC, the right to use, reproduce, assign and/or distribute photographs, films, video tapes, and sound recordings of me for use in materials they may create.

Signature: \_\_\_\_\_

Parent/Guardian's Signature \_\_\_\_\_



**LEAVE NO TRACE CENTER FOR OUTDOOR ETHICS  
COURSE PARTICIPANT ACKNOWLEDGMENT, ASSUMPTION OF RISKS,  
RELEASE AND INDEMNITY AGREEMENT**

**For all Leave No Trace course participants: Please read this document carefully.**

Leave No Trace Center for Outdoor Ethics ("the Center") is an educational non-profit dedicated to the responsible enjoyment and active stewardship of the outdoors by all people worldwide, focusing its education efforts on ways for human powered recreational visitors to reduce their impacts on the natural area and the experience of other visitors, by developing and distributing educational curriculum and materials. The Center does not teach, oversee or conduct specific courses, but provides other organizations and individuals trained as Master Educators or Trainers with the materials to teach the Center's curriculum.

The Center has no control over course content; course conduct; scheduling; training of Master Educators, Trainers, or the quality of their training or expertise, other than courses taught by Center staff. The Center does not control their conduct, and does not warrant or guarantee the quality or expertise of any course or individual instructor. The Center welcomes your interest in and devotion to the Leave No Trace program. The role of the Center is to provide educational curriculum to Master Educators and Trainers. Likewise, the Center is available as a resource for you as you go forth and spread the Leave No Trace word. If you have questions or concerns about Leave No Trace, vis-a-vis your course, please feel free to contact the Center at the number below. Thanks again for your interest in promoting Leave No Trace. 800.332.4100, [www.LNT.org](http://www.LNT.org).

**Participants are advised to independently review and examine the qualifications of individuals or organizations providing Leave No Trace courses.**

**Course Participants – Release, Acknowledgment & Assumption of Risks**

In consideration for being allowed to participate in the training courses, the undersigned hereby agrees to release, indemnify, and discharge Leave No Trace Center for Outdoor Ethics, and its respective members, participants, volunteers, agents, employees, subcontractors, and all other persons or entities acting in any capacity on its behalf (collectively referred to as "the Center") on behalf of the undersigned, his or her spouse, children, parents, siblings, heirs, assigns, personal representative and estate as follows:

1. Leave No Trace courses provide participants with information and techniques so that they can engage in minimum-impact outdoor ethics and principles. Those who successfully complete a Leave No Trace course can then teach others about outdoor ethics. Leave No Trace courses focus on outdoor ethics but Leave No Trace courses do not teach traditional outdoor skills such as mountain climbing, river crossings, camping, backpacking, horse packing, rafting, etc. However, some Leave No Trace courses must be taught in an outdoor or wilderness setting. Activities vary, but can include hiking, camping, rafting and horseback riding and students should have basic outdoor skills before attending a course.
2. As the Center has no control over the actual course(s) being taught (other than courses taught by Center staff), the Center cannot know of the specific dangers that may be associated with the course(s). However, these activities necessarily include inherent and other risks, hazards and dangers which may result in hypothermia, dehydration, frostbite, drowning, falling, high altitude sickness, colliding with objects or people, heart or lung problems, broken bones, burns, property damage, illness, physical or emotional trauma, or other injury, disability, damage, death, or loss. The following are some, but not all, of the most common risks, hazards and dangers that may be associated with any course(s):

Risks present in an outdoor environment.

- a. These risks include travel in mountainous or wilderness terrain, both on and off trails. While traveling in these areas, hazards may not be marked, weather is unpredictable year around, and lightning, rapidly moving rivers/whitewater, falling rocks, snow and ice, high altitudes, avalanche dangers, fallen timber, stinging insects, wild animals, and hazardous plant life;
- b. Risks connected with cooking and camping chores. While camping, participants may cook over a stove or an open fire and are subject to the risk of gas explosion or burns. Participants may need to disinfect water before use;
- c. Risks in staff decision making and conduct. Master Educators and Trainers have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They may give incomplete warnings or instructions, they could misjudge the weather, terrain, water level, or route location. Each participant should question the individual instructor(s) of the course to learn the associated risks and safety precautions employed;
- d. Risks associated with travel. Travel may be on foot, or by vehicle, boat or other means, and may be over dif-

- difficult terrain or via lakes and rivers, in adverse weather conditions;
- e. Risks connected with geographic location. Remote locations may create difficulties in communication and transportation and delays in evacuation and medical care;
- f. Risks regarding equipment. Equipment used in an activity may break, fail or malfunction;
- g. Risks regarding conduct. It is possible that you, other participants or third parties (e.g. driver, rescue squad, hospital) may act negligently or recklessly.

3. By voluntarily agreeing to participate, you assume and accept full responsibility for yourself, for the inherent and other risks of these activities (both known and unknown), and for any injury, damage, death, or other loss you may suffer, resulting from such risks and resulting from your own, and other's, negligence or other misconduct.

4. THEREFORE, YOU VOLUNTARILY RELEASE, FOREVER DISCHARGE, AND AGREE TO INDEMNIFY AND HOLD HARMLESS THE CENTER, and pay all damages, judgments or amounts, expenses, including all costs of defense and/or costs of enforcing this agreement, including attorney's fees and costs, incurred by the Center related to such lawsuits, claims, demands, or causes of action, which are in any way connected with your participation in this activity or your use of the Center's equipment or facilities, INCLUDING ANY SUCH CLAIMS WHICH ALLEGE NEGLIGENT ACTS OR OMISSIONS OF THE CENTER.

5. You certify that you have adequate insurance to cover any injury or damage you may cause or suffer while participating, or else you agree to bear the costs of such injury or damage yourself. You further certify that you are willing to assume the risk of any medical or physical condition you may have. You hereby authorize the Center, or anyone acting on its behalf, to seek medical treatment for you if you are unable to request it for yourself.

6. In the event that you file a lawsuit against the Center, you agree to do so solely in the state of Colorado, and you further agree that the substantive law of Colorado shall apply in that action without regard to the conflict of law rules of that state. You 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.

7. You consent to having any photograph of yourself or your family members used, published or sold (without compensation to you or them) by the Center.

BY SIGNING THIS DOCUMENT, YOU ACKNOWLEDGE THAT IF ANYONE IS HURT OR PROPERTY IS DAMAGED DURING YOUR PARTICIPATION IN ANY LEAVE NO TRACE COURSE, YOU MAY BE FOUND BY A COURT OF LAW TO HAVE WAIVED YOUR RIGHT TO MAINTAIN A LAWSUIT AGAINST THE CENTER ON THE BASIS OF ANY CLAIM FROM WHICH YOU HAVE RELEASED THE CENTER HEREIN. YOU HAVE HAD SUFFICIENT OPPORTUNITY TO READ THIS ENTIRE DOCUMENT, YOU HAVE READ AND UNDERSTOOD IT, AND YOU AGREE TO BE BOUND BY ITS TERMS.

Signature of Participant \_\_\_\_\_ Print Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Date \_\_\_\_\_

**PARENT'S OR GUARDIAN'S ADDITIONAL INDEMNIFICATION**  
(Must be completed for participants under the age of 18)

In consideration of (print minor's name) (the "Minor") being permitted by the Center to participate in its activities and to use its equipment and facilities, you warrant that you are the parent or guardian of the Minor and that you have the authority to make decisions as to the Minor's participation in recreational activities, You further agree to indemnify and hold harmless the Center from any and all claims which are brought by, or on behalf of the Minor, and which are in any way connected with such use or participation by the Minor. YOU HEREBY CONSENT TO THE MINOR PARTICIPATING IN THE TRIP, AND YOU UNDERSTAND AND AGREE THAT ALL OF THE TERMS OF THIS AGREEMENT SHALL APPLY EQUALLY TO BOTH YOU AND THE MINOR.

Signature of Parent or Guardian \_\_\_\_\_ Print Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Date \_\_\_\_\_