

# The Hans Saari Memorial Fund

## SKI EXPLORATION GRANT

The Hans Saari Memorial Fund's Ski Exploration Grant encourages the development of skills and qualities consistent with Hans's approach to skiing and travel in the mountains. The grant supports skiing and exploration in alpine environments while also encouraging the creative documentation of the experience. While ski objectives do not need to be at the leading edge of ski mountaineering to receive this grant, proposals that choose to focus on unexplored or un-skied objectives will receive special consideration. Repeats of difficult and historic routes will also be considered. Because of the Fund's interest in raising awareness and enthusiasm for ski exploration and avalanche safety, the Grant Committee will also carefully consider the applicant's plan for recording and reporting the experience to the Board of the Fund and the broader community of skiers.

**The application deadline in March 1<sup>st</sup>.** Grant applications may be made electronically or sent by mail, postmarked no later than the due date. Applications, including those submitted electronically, must include signatures and initials in appropriate sections to be considered. The Fund may award \$15,000 and up to 3 grants annually. Grants are awarded once per year. Applicants will be notified of awards by March 30<sup>th</sup> and will have one year to use the award. Questions regarding the application process may be submitted to [info@hansfund.org](mailto:info@hansfund.org)

### Selection Criteria

A qualified Committee determined by the Board of Directors will review the applications, select the recipients, and decide the amount of the grant awarded. The committee members will have a knowledge of skiing and an ability to evaluate the documentary aspects of the application.

- The grant applicant must be a US citizen
- Applicants must be at least 18 years of age and complete legal liability releases
- Expeditions must be environmentally conscious and carried out with respect for the local inhabitants, cultures and laws.

### Skiing/Exploration Component

- The Committee will consider the proposed skiing/exploration objectives, taking into account the nature and overall significance of the project. Acceptable objectives/examples might include a significant new descent, a historic descent done in better style, circumnavigation of an entire range or massif, traverses of unexplored Arctic regions, etc.... **Creativity is encouraged.**
- The skiing/exploration style will be considered closely. Teams skiing in the highest ethical standards and small, self-sufficient teams using a minimum of siege tactics, camps, personnel, and equipment are strongly favored. Commercial, professional, and principally cause-related expeditions are ineligible.

- The Committee encourages innovative and thoughtful plans that include a thorough evaluation of hazards and means to reduce objective risks.
- The Committee will consider the team's overall experience level, which must match the proposed objective.

### **Documentary Component**

- The Committee is open to and encourages all forms of documentation of the expedition including writing, photography, film, graphic art, painting, etc...  
**Again, creativity is strongly encouraged**
- The Committee will place emphasis on the applicant's plan for documenting and presenting the expedition to the Board and the public.
- The quality and planning of this component of the grant will be an important determinant of success.

### **Responsibilities**

- If any of the grant objectives are cancelled or significantly changed (i.e. a new descent on Denali turns into heli time around Valdez )all funds and materials must be returned or repaid to the HSMF. This includes but is not limited to the value of the airline tickets, all grant funds and any gear/goods donated by the industry sponsor.
- Unless agreed to by the Fund, within two months of returning, all grant recipients must submit to the HSMF the documentary component of the grant for possible inclusion in HSMF publications and presentations.
- Recipients may be asked to give a presentation on the project for which grant funds were awarded at the annual meeting of the Board of Directors or presentations sponsored by the Fund.

### ***Submit application to:***

The Hans Saari Memorial Fund  
info@hansfund.org  
406-556-1275

or The Hans Saari Memorial Fund  
P.O. Box 10478  
Bozeman, Mt 59719

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## THE HANS SAARI MEMORIAL FUND SKI EXPLORATION GRANT

### APPLICATION

In order to process your application in a timely manner, we ask that you please:

- **Submit electronically or by mail.** For consideration, applicants must include signature and initials in all indicated locations. Application and Release Agreement must be received electronically or be postmarked by the March 1 application deadline.
- Type or print clearly.

Name (Last, First, Middle): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Email: \_\_\_\_\_

Amount Requested: \_\_\_\_\_ Dates of program: \_\_\_\_\_

**Please answer the following questions and submit with the application and Agreement.**

- 1) How did you hear about the Hans Saari Memorial Fund Exploration Grant?
- 2) Please summarize your previous ski and avalanche education or experience. What are your strengths that will help you on this project and what skills would you like to improve on during the project?
- 3) Describe your project and goals. Include anticipated itinerary, budget, equipment needs, safety protocol, photos of route, style of ascent, descent. Please include a description of the primary objective hazards posed by your intended route and how you plan to mitigate these hazards.
- 4) What is the significance of your expedition? How do you differentiate your project from others?
- 5) How will you prepare for the project?
- 6) Explain your plan to record, document, and present the project.
- 7) Who are your climbing/skiing partners on this expedition? (Include climbing/skiing resume)
- 8) What other funding sources are you seeking to assist with this expedition?
- 9) What about mountains and skiing most inspires you?

By my signature, I agree that:

- All of the information presented here is accurate and true.
- Any awarded funds will be used for the purposes stated and any changes in the proposed activity will be reported to the HSMF.
- If, for any reason, the program is canceled or significantly changed or I am unable to attend or participate, awarded funds must be returned to the HSMF.
- I will be responsible for any taxes that may apply to the award received.
- The activities related to these Grant funds are legal in the jurisdictions where the activities will take place.

- In any publications, presentations, lectures, or slide shows about my Grant activity, I will state that I received an HSMF grant and will include an HSMF slide (sent to all winners) in my presentation.
- Upon request, I will provide the Hans Saari Memorial Fund with photographs, slides, or other materials used to record this Grant activity for use in publications or presentations related to the Fund.

Signed: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Date: \_\_\_\_\_ (for tax purposes only)



## RELEASE AGREEMENT

### Release and Discharge, Acceptance of Responsibility and Acceptance of Risks

THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS. YOU MUST READ AND UNDERSTAND IT BEFORE INITIALING OR SIGNING IT. FOR RECIPIENTS UNDER 18, THIS DOCUMENT MUST BE SIGNED AND INITIALED AT ALL INDICATED LOCATIONS BY A PARENT OR LEGAL GUARDIAN

*Although the Hans Saari Memorial Fund Education Committee and Board of Directors look to criteria to review scholarship applications and strive to select responsible participants to receive Hans Saari Scholarship Funds, the Education Committee and Board of Directors do not oversee, supervise, or take responsibility for any aspect of the programs or other activities that participants choose to undertake. In addition, the Education Committee and Board of Directors may, from time to time, contract with individuals or organizations that are independent contractors (not employees or agents of the Hans Saari Memorial Fund) to conduct certain training courses in which participants may choose to participate. Although reasonable efforts are made to locate responsible contractor, the Hans Saari Memorial Fund does not supervise or control these contractors and are not responsible for their conduct.*

Name \_\_\_\_\_

If under age 18, name of parent or guardian: \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Date \_\_\_\_\_

In consideration of the services of and scholarship funds granted by The Hans Saari Memorial Fund, and each of their respective agents, employees, officers, directors, trustees, representatives, independent contractors, volunteers, and all other persons or entities associated or affiliated with them (collectively referred to in this Document as 'HSMF'), I, the above named person, being above age 18, or the legal guardian of the above named person who is under age 18, hereby acknowledge, agree and promise and covenant to release and discharge the HSMF on behalf of myself, my heirs, assigns, personal representatives and estate as follows:

## ACKNOWLEDGEMENT OF RISK

I understand and acknowledge that the activity for which I am receiving this scholarship in and which I voluntarily engage in bears certain risks that could result in injury, death, illness, disease, physical or mental, or damage to my property. Among these risks are the following:

1. Acts or omissions in any degree of the HSMF, its agents or employees, and other persons or entities
2. the nature of the activities themselves such as, mountaineering, rock climbing, ice climbing, skiing, and any combination thereof;
3. the acts of other participants in these activities;
4. weather conditions;
5. contact with plants or animals;
6. my own physical condition, or my own acts or omissions;
7. condition of roads, trails, waterways or terrain, and accidents connected with their use and the use of vehicles of approach, including, but not limited to land vehicles, aircraft, fixed and rotary wing;
8. first-aid, emergency treatment, or other services rendered;
9. consumption of food or drink.

I understand and acknowledge that the above list is not complete or exhaustive, and that other risks, known or unknown, identified or unidentified, may also result in injury, death, illness, disease, or damage to my property

I have read this section and initial it to show that I understand and agree: \_\_\_\_\_

## RELEASE AND INDEMNITY

I hereby voluntarily release and forever discharge the HSMF from any and all liability, claims, demands, actions or rights of action, which are related to this of scholarship award, or are the result activities for which the scholarship is received: including specifically, but not limited to, the acts of the HSMF for all injury, death, illness, disease or damage to my property.

I further agree, promise and covenant to hold harmless and indemnify the HSMF for any liabilities, demands, claims, or actions caused by actions or activities for which the scholarship was received. I agree, promise, and covenant not to sue, assert or otherwise maintain or assert any claim against the HSMF for any injury, death, illness, disease or damage to my property, arising from the receipt of said grant or connected with my participation in the activities for which the scholarship was received.

I have read this section and initial it to show that I understand and agree: \_\_\_\_\_

**ACKNOWLEDGEMENT OF EFFECT OF THIS RELEASE AGREEMENT**

I understand and acknowledge that by initialing and signing this document I have given up certain legal rights and/or possible claims which I might otherwise assert or maintain against the HSMF including specifically, but not limited to, rights arising from the acts or omissions of the HSMF.

It is agreed and understood by and between the parties that any legal dispute arising out of the Agreement is to be adjudicated under the laws of the State of Montana.

It is also agreed and understood by and between the parties that if any Court should vacate or strike any portion of this Agreement, such vacating or striking will not affect any other portion of this Agreement.

I have read this section and initial it to show that I understand and agree: \_\_\_\_\_

**ENTIRE AGREEMENT**

I understand that this is the entire agreement between me and the HSMF, and it cannot be modified or changed in any way by the representations or statements of any employee or agent of the HSMF, or by me.

I have read this section and initial it to show that I understand and agree: \_\_\_\_\_

My signature below indicates that I have read this entire document, understand it completely, and agree to be bound by its terms.

DATE: \_\_\_\_\_

SIGNATURE OF RECIPIENT: \_\_\_\_\_

SIGNATURE OF PARENT OR GUARDIAN (if under age 18): \_\_\_\_\_

SIGNATURE OF WITNESS: \_\_\_\_\_