

2022 Missouri Archaeological Society Training Program

The Missouri Archaeological Society in partnership with the L-A-D Foundation and the Mark Twain National Forest is pleased to offer an archaeological-survey training program.

This hands-on program is free to all participants and will involve the training of members of the interested public. A refundable deposit of \$30 will be required at the time of registration. This deposit is to hold a place and will be refunded should the individual participate. The deposit will not be refunded to those who sign up, but don't participate, with exceptions for extenuating circumstances.



The program will allow participation by individuals as young as 12 years of age. However, a legally responsible adult must accompany those of 12–17 years of age. The program is limited to 16 participants.

The program will be conducted at the Piney River Narrows Natural Area in Texas County on June 6–10.

Free tent camping for participants will be available on private property adjacent to the Narrows. Electricity will be available onsite, but not at each tent. Bathroom facilities will be porta-potties and hot porta-showers. More details regarding camping will be provided to each participant when they are accepted into the program. Participants will be responsible for cooking or obtaining their own meals at their own expense.

The week will include instructional classroom activities, field survey, laboratory analysis, and recording of identified archaeological resources. The work week will be Monday through Friday from 8 a.m. to 4:30 p.m. Instruction will be by professional archaeologists.

The following items are recommended for all participants: backpack, camera, folding chair, insect repellent, sturdy shoes (work boots), sunscreen, wide-brimmed sun hat, and work gloves. We also recommend that participants wear long pants for fieldwork due to vegetation and terrain.

For those who are camping, the following additional items are recommended: tent, bedding, towels, cooking equipment, cooler, and any other items needed for comfort while camping.

Registration will be on a first-come first-serve basis. Please contact the MAS office at 417-836-3773 or mas@missouristate.edu with questions. Registration forms will also be available on the MAS website at missouriarchaeologicalsociety.org.

Social distancing and other Covid protocols will be enforced as needed.

To enroll, complete the enclosed application form and waiver and return with the \$30 deposit to the MAS office:

*Missouri Archaeological Society
Missouri State University
901 S. National
Springfield, MO 65897
pho 417-836-3773
mas@missouristate.edu*

Once your registration is received, you will be notified as to your enrollment status and more details will be provided.

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. (Not all prohibited bases apply to all programs.)

To file a complaint alleging discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington DC 20250-9410 or call toll free voice (866) 632-9992, TDD (800)877-8339, or voice relay (866) 377-8642. USDA is an equal opportunity provider and employer.

2022 PROGRAM APPLICATION

NAME _____ Email _____
Address _____
Home Phone No. _____ Cell Phone No. _____

If you are a minor, please provide contact information for the accompanying legal guardian:
NAME _____ Email _____
Address _____
Home Phone No. _____ Cell Phone No. _____

Person(s) to contact in case of an emergency:
NAME _____ Email _____
Address _____
Home Phone No. _____ Cell Phone No. _____
Relationship _____

Will you require a campsite? _____

MEDICAL INFORMATION:

Date of Birth _____ Tetanus Vaccination Date _____
Name of Physician _____ Phone No. _____
Health Insurance Company _____
Policy Number _____ Policy Holder's Name _____

Are you allergic to:

Bee/Wasp Stings _____ Poison Ivy _____ Other _____

Archaeological surveys typically require walking and hard work, often in heat and high humidity. Does your health/physical condition allow you to do such work? _____

If you have health/physical conditions that might require accommodation in the field, please specify:

Archaeological resources are the last surviving traces of people who lived before us. The archaeologist seeks to reconstruct the lifeways of these people from their nonrenewable material remains. This requires careful and hard work, as well as an attitude of respect for the people whose lives we seek to understand. Failure to maintain a respectful attitude will result in expulsion from the program.

I am aware that archaeological survey sometimes involves bad weather, insects, poison ivy, and other discomforts.

I understand that I will be camping with a group of people on private property and will behave in a respectful and ethical manner toward my fellow participants and the property owners; failure to do so will result in expulsion from the program.

I understand that social distancing and other Covid protocols may be in place and agree to abide by these.

I certify that the information contained on this application form is complete and accurate. I understand that any misrepresentation also may result in expulsion from the program.

Signature _____ Date _____

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AGREEMENT AND RELEASE

I, the undersigned, an applicant for the Missouri Archaeological Society (MAS) Training Program, do waive and release all claims against the MAS and its agents for any injury, loss, damage, accident, or expense incurred while participating in the program. I also release the MAS and its agents and agree to indemnify them, with regard to any financial obligations or liabilities that I may personally incur or any damage or injury to the person or property of others that I may cause while participating in this program.

I understand that the MAS is not responsible for any injury or loss whatsoever suffered by me during periods of independent travel (which I understand may not be supervised) or during any absence from the program or other MAS-supervised activities.

I hereby grant the MAS and its agents full authority to take whatever actions they may consider to be warranted under the circumstances regarding my health and safety, and I fully release them from any liability for such decisions or actions as may be taken in connection herewith. I authorize the MAS and its agents, at their discretion, to place me, at my own (or my parents'/guardians') expense, and without my further consent, in the hands of a medical doctor or in a hospital for medical treatment. If deemed necessary or desirable by the MAS or its agents, I authorize them to transport me back home or to another appropriate destination at my (or my parents'/guardians') expense for medical treatment.

I will comply with MAS and/or training program rules, standards, and instructions for behavior and will refrain from consumption of alcohol/drugs during the training sessions, including travel to and from the field area. I understand that this program is co-educational and will include participants of varying backgrounds and agree to conduct myself in a manner that respects the rights and feelings of all participants in the program. I further agree to conduct myself in such a way as not to violate the standards of the community in which we will be living and working and will comply with all instructions of the program director(s) on these matters.

I agree that the MAS or its agents shall have the right to enforce appropriate standards of conduct, and that they may at any time terminate my participation in the MAS program for failure to maintain these standards or for any actions or conduct that the MAS or its agents consider to be incompatible with the interest, harmony, comfort, well-being, or safety of other participants or local residents. If my participation is terminated, I consent to being sent home at my own (or my parents'/guardians') expense.

I understand that permission must be granted by the MAS or its agents to leave the field site or to engage in any independent/unsupervised activities at or away from the site. I hereby waive and release all claims against the MAS and its agents arising at a time when I am not under direct supervision of the MAS and its agents or arising out of my failure to remain under such supervision or to comply with such rules, standards, and instructions; and I agree to indemnify the MAS and its agents against any consequences thereof.

All references in this Agreement and Release to the "MAS and its agents" shall include Missouri State University and all of its governors, administrators, and staff as well as administrators, faculty, staff, and student supervisors directly associated with the training program.

I understand and agree to all of the terms and conditions outlined above. I further understand that this agreement shall become effective only upon receipt of my application by the MAS and shall be governed by the laws of the State of Missouri.

Signature of Applicant
Age _____

_____ Date _____

I certify that I am the parent or legal guardian of the above applicant, and that I have read the foregoing Agreement and Release (including such parts as may subject me to personal financial responsibility), and hereby relinquish any claim that I might have against the MAS or its agents (as set forth above), both in my own behalf and in my capacity as legal representative of the applicant, including without limitation any claim arising as a result of the applicant's leaving the supervision of the MAS or at a time when the applicant has left the supervision of the MAS.

Signature of Applicant

_____ Date _____