

MOUNT WILSON INSTITUTE

60-inch Program, P.O. Box 1909, Atlanta, Georgia 30301-1909
voice: (404) 861-7620 – fax: (404) 413-5481 – email: 60inch@mtwilson.edu

60-INCH TELESCOPE TIME REQUEST & AGREEMENT FORM (PLEASE PRINT)

SESSION DAY & DATE: _____ 1st Half Night _____ Full Night _____ ARRIVAL TIME: _____

ORGANIZATION (School, business, club, etc.): _____ (Hereinafter “Visitor”)

ADDRESS: _____

ORGANIZATION CONTACT(S): _____ DATE: _____

PHONE: _____ E-MAIL: _____

TRANSPORTATION (Private vehicles, bus): _____ HOW MANY: _____

NUMBER OF ADULTS: _____ CHILDREN 12 TO 16: _____

(Limited to 25 persons total per visiting group; 1 adult required per 5 children)

COMMENTS, INFORMATION, OR SPECIAL REQUESTS: _____

1. Visitor acknowledges that the Mount Wilson Institute (hereinafter “MWI”) is a non-profit, IRC 501(c)(3) tax-exempt corporation that operates the scientific facilities on Mount Wilson pursuant to agreements with the Carnegie Institution of Washington and the United State Forest Service. Visitor understands and acknowledges that the scientific facilities at Mount Wilson are not open to the general public and that access thereto is by invitation and by agreement.
2. Visitor agrees to follow all rules, regulations and customs that are promulgated for visitors at Mount Wilson. Visitors will comply with all reasonable instructions of guides, docents and other personnel conducting visits and tours of the facilities on Mount Wilson. Visitor will also comply with all rules and regulations of the United States Department of Agriculture Forest Service. Violation of these requirements may result in suspension of Mount Wilson visiting privileges.
3. Visitor shall defend, indemnify, and hold MWI, the Mount Wilson Observatory Association, and the Carnegie Institution of Washington, their trustees, officers and employees harmless from and against any and all claims, actions, suits, proceedings, costs, expenses, damages, injuries and liabilities of any kind or nature, including attorney’s fees arising out of, or in connection with, the Visitor’s use of the facilities at Mount Wilson. This indemnification shall not apply to negligence or intentional act that is solely caused by officers, agents, employees, or servants of MWI.
4. Visitor agrees to assume all risks of loss to persons or property which may occur during their visit except such loss as may be occasioned or caused solely by gross negligence or intentional act of any of the officers, agents, employees, or servants of MWI.
5. By signing this agreement the Visitor agrees to each of the above terms and conditions and certifies that he/she has read and accepts the Cancellation Policy.

Certification by Individual Visitor or Authorized Representative of Visiting Organization:

Printed Name

Signature

Date