

**BAINBRIDGE OMETEPE SISTER ISLANDS ASSOCIATION  
ASSISTANT OFFICE MANAGER**

**DISCLOSURE OF RISKS AND DANGERS  
ASSUMPTION OF RISK**

**Disclosure of Risks and Dangers**

The Bainbridge Ometepe Sister Islands Association (hereafter known as BOSIA) provides the opportunity for the Assistant Office Manager to work in our office on our sister island of Ometepe, Nicaragua and to engage in such activities which are in accordance with our stated purpose of developing peaceful exchanges and friendship between the peoples of the two islands. In order to carry out this purpose, the Assistant Office Manager will live and travel while in Nicaragua as the local people do, which may expose him/her to concomitant risks. The list below does not cover every conceivable risk, but is intended to be representative:

**General Risks and Dangers:** There are general risks associated with travel of any sort. In addition, in Nicaragua there may be additional risks and dangers:

**Transportation:** Standards of transportation safety, including but not limited to the following, are lower in Nicaragua than in the U.S., and are outside the control of BOSIA: the condition, maintenance and safety requirements of surface, air, and water vehicles; the condition, maintenance and policing of roads, airways, and waterways; training and licensing of vehicle operators; requirements for personal safety such as seat belts; travel in the back of an open truck; provision for rescue operations in case of accident; and general safety standards with respect to any aspect of public or private transportation.

**Health and Sanitation:** Standards of health and sanitation are lower than in the U.S. As a result, a Volunteer Delegate may be exposed to contaminated food and water and to other medical problems and diseases endemic to the area, including but not limited to those discussed during the interview.

**Medical Care:** While there are doctors and clinics in Nicaragua and on Ometepe which can provide basic medical care, appropriate medical care under some conditions outside the control of BOSIA will be limited or unavailable for the following reasons: limited medical supplies and facilities to treat a condition that otherwise might be manageable, inadequate training of medical personal, limited or non-existent diagnostic tools and laboratories, lack of an ambulance or other medical transportation, and limited or non-existent communication systems such as radio or telephone.

**Bites:** A Volunteer Delegate may be exposed to bites from poisonous snakes, insects, spiders, scorpions, etc. Mosquito bites may cause malaria or dengue fever.

**Other Conditions:** Various other types of risks and dangers occur in Nicaragua because of conditions arising from the fact that it is an underdeveloped country, including but not limited to the following: inadequate supply of life preservers on boats, lack of lifeguards at public swimming places, fewer police and other enforcement officials, criminal or terrorist activity, political unrest, personal or family conflict, and uncontrollable disease epidemics. Unknown and/or unanticipated risks may be encountered during the trip.

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**Disclosure of Risks and Dangers (cont'd)**

**Assumption of Risk**

I, the undersigned Assistant Office Manager, understand that the risks described above exist, and that as a result there is the possibility of serious illness, disability, accident, or even death. I have read completely the "Disclosure of Risk" info above and I have had the opportunity to ask questions about the risks and dangers associated with such a trip. I understand these risks are inherent in the trip, and as a condition of participation in the trip I hereby assume the risks and dangers associated with such a trip voluntarily and without any coercion of any kind.

As a Assistant Office Manager I also understand that while BOSIA and/or its representatives will make all reasonable efforts to assist me in locating and obtaining first aid and basic medical care should the need arise, BOSIA will not assume responsibility for or pay for any medical expenses which I may incur while I am acting as a Volunteer Delegate, except the basic Catastrophic Medical Insurance policy described in the Contract. My signature below indicates that I will carry and maintain any additional necessary medical insurance while I am acting as a Assistant Office Manager, and that I will be responsible for my own medical expenses.

Furthermore, I agree to release and hold harmless, to the fullest extent allowed by law, the Bainbridge Ometepe Sister Islands Association, it members, Board of Directors, employees and representatives, from all claims and liabilities resulting from the trip.

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**Signature of Assistant Office Manager**

\_\_\_\_\_  
**Date**