



ELEMENTS - WOMEN'S TRAVEL

RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT BY SIGNING THIS DOCUMENT YOU GIVE UP THE RIGHT TO SUE, AND ASSUME BOTH RISK AND EXTRAORDINARY RISKS INHERENT TO ADVENTURE PURSUITS

INITIALS

PLEASE READ CAREFULLY

NAME: LAST FIRST MIDDLE
MAILING ADDRESS: STREET CITY PROV/STATE ZIP/POSTAL CODE
PHONE: HOME BUS. EMAIL

I hereby acknowledge and agree that in consideration of being permitted to participate in the activities and to use the equipment of ELEMENTS Women's Travel, including but not limited to vessels, equipment and vehicles for travel to and from any activities, and with full knowledge of the risks of the activities, I hereby for myself, my heirs, executors, administrators and personal representatives, waive, release and forever discharge ELEMENTS Women's Travel, and its owners, employees, representatives, successors, assigns, other affiliates and any other persons acting under the authority of ELEMENTS Women's Travel (all of whom are hereinafter collectively referred to as 'THE RELEASEES')

I ACKNOWLEDGE AND AGREE that participation in activities and the use of equipment may expose me to risks and hazards, which are inherent in the nature of outdoor pursuits, kayaking, hiking, "Essential Elements" activities, and eating, including unpredictable weather, terrain and water conditions, attack by, or injury caused by marine life, wild animals, plants or insects, illness, proximity to medical care and some which may result from other causes, including without limitation, negligence or errors in human judgment. I AGREE to assume all such risks and further agree to pay the costs of all rescue and medical attention rendered to me arising from the activities or use of the equipment.

I ACKNOWLEDGE AND AGREE that the ability to understand English will affect my performance and failure to understand verbal commands may create increased risks.

I ACKNOWLEDGE AND AGREE that the consumption of alcohol and illegal drugs is not permitted during instructional time and could lead to my expulsion.

I ACKNOWLEDGE AND AGREE to grant ELEMENTS Women's Travel permission to use my written testimonial(s) and my likeness in photographs/video in any and all of its publications and in any and all other media, whether now known or hereafter existing, to promote or advertise ELEMENTS Women's Travel goods and services.

Yes [] No []

I will make no monetary or other claim against for ELEMENTS Women's Travel for the use of the testimonials, photographs/videos.

Yes [] No []

This Agreement and any rights, duties and obligations as between the parties to this Agreement shall be governed by and interpreted solely in accordance with the laws of the Province of British Columbia and no other jurisdiction. I agree that any errors and/or omissions accorded in this document will not discount this Agreement, and agree that the document will be binding.

I CERTIFY that I am medically, physically and mentally fit to participate in the activities AND that I have READ AND UNDERSTOOD THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, FAMILY MEMBERS, EXECUTORS, ADMINISTRATORS AND REPRESENTATIVES MAY HAVE AGAINST THE RELEASEES in the event of my death or incapacity.

SIGNED THESE _____ DAYS OF _____, 20____.

WITNESS
PLEASE PRINT NAME CLEARLY

SIGNATURE OF PARTICIPANT
PLEASE PRINT NAME CLEARLY