Assumption of Risk, Liability & Photo Release – Whitewater Voyages

Trip Date _____ River Section _____

happen. I expressly assume all risk on this event. And or expect any legal responsibility from Whitewater Voya and employees and agents, or from participating or spo	in an activity where risk is natural and where accidents, though rare, can ad if I damage belongings or am hurt or die, I will not make a claim, sue, yages Kern, Inc, or from Whitewater Voyages, Inc. or from their officers consoring companies and organizations, landowners, booking agents, ity (collectively referred to as <i>Voyages</i> , in the following paragraphs).
property damage, personal injury or fatality. On land, si wildlife or other persons can lead to injury. Accidents w or thrown and collide with people, their paddles, or trip or from accidental tumbles or boat flips. Here I could ex break bones or drown. Entanglements with trees or roo to extreme temperatures or bad weather, coupled with or	tand that inherent risks, ashore, in a boat, or in the water, can lead to slips and falls can result in accidents. Contact with poison oak, insects, with transportation vehicles are possible. In a boat, I could be twisted a equipment. I might be in the water, either voluntarily for practice floats experience hypothermia, mental anguish, or heart attack and I could tooks could lead to severe injury or death. In each possibility, exposure a distant medical help, would add risk. Regardless, my participation to do so at my own risk. I expressly accept and assume all ated) to myself, to others, and to property.
liability claims. These could be claims arising out of: su breach of contract, or any act which causes my acciden participation in this activity. This release will apply also emergency aid. In signing this document, I fully und release) am hurt, die or have property damaged, I ar assigns) to make a claim or file a lawsuit against Wi	tarily agree to release, discharge, and hold harmless Voyages from all suggested negligence, recklessness, incorrect decisions, strict liability, ent, illness, death, or damages in any way associated with my so to any negligence in rendering (or in not rendering) medical or inderstand that if I (or any minor on whose behalf I am signing this am giving up my right (and that of my family members, heirs and Whitewater Voyages Kern, Inc., Whitewater Voyages, Inc. and from ere, even if they negligently or by some other act (or omission of
photographic record of my participation may be used fo parent or legal guardian of a participant under 18 years their behalf. In addition, I give Voyages permission to to expenses will remain solely my responsibility. I also comentally capable of this activity. If necessary for Voyagenforce any part of this agreement, I agree to indemnify agreement is judged invalid, the validity of the remaining will be heard in Kern County under California law. My seement of legal to the part of the service of the participation of the participation of the service of the participation of the particip	vice to any person. I agree to follow all their rules and instructions. Any for advertising and commercial purposes without recourse. If I'm a rs of age, I agree to this minor's participation and I sign this release in treat this minor in case of apparent need. Any medical services and certify that I (and any minor for whom I am signing) am physically and ages (or agents or associates) to incur attorney's fees and costs to ify and reimburse them for all such expenses. If any portion of this ing portions will not be affected and will remain in force. Legal disputes a signature below indicates I have read and now completely my legal rights and I agree to be bound by its terms.
PASSENGER (PLEASE PRINT)	IMPORTANTARE YOU A MINOR?
Name: Age	If you are less than 18 yrs. old on day of the trip, a
Address:	parent's/legal guardian's signature is required (in addition to yours). If they will <u>not</u> be accompanying
CITY/ST: ZIP	you, their signature needs to be provided in advance; if so, please sign both now, indicate
EMAIL:	relationship, and submit upon check in.
SIGNATURE:	Parent or legal guardian signature:
DATE:, 201	Relationship:
	Date:, 201