



Adventure Activity Participation Agreement

Between Esprit Rafting Adventures Inc. and the Participant

NAME: _____
ADDRESS: _____
CITY: _____ PROVINCE: _____ P.C. _____
COUNTRY: _____ TEL: _____
E-MAIL: _____

PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH:
CONSIDERING that the participant is requesting to participate in the following activity:

THE UNDERSIGNED PARTICIPANT DECLARES THE FOLLOWING

- 1/ The outfitter has explained, illustrated and/or demonstrated to my satisfaction the nature, risks and dangers of the above mentioned "Adventure Activity" , and I accept these risks: _____
- 2/ I am aware that the activity in which I am about to participate is physically demanding and dangerous, and the possibility of injury, loss, trauma, sudden cardiac arrest, drowning or death exists; _____
- 3/ Specifically, I understand that in the course of a river descent, the boat may capsize and/or I could be thrown from the boat and fall into the water at any point on the river; _____
- 4/ I declare my intention to participate in these activities at my own risk and I specifically release the outfitter from any responsibility regarding any loss or damages that I might suffer; _____
- 5/ I declare that I am not under the influence of alcohol or drugs and that I will not partake in the use any for the duration of the activity; _____
- 6/ I will follow and comply with each and all instructions given by the outfitter, its guides, instructors or any of its employees; _____
- 7/ I accept responsibility for any expenses incurred on my behalf or as a result of my actions; _____

Please copy out the following statement in your own hand writing:

I DECLARE THAT I HAVE READ, UNDERSTAND AND ACCEPT EACH PARAGRAPH OF THIS AGREEMENT.

Print Name

Signature of Participant

Name of parent or guardian if participant is under 18 years of age.

Signature of Parent or Guardian



Adventure Travel Participation Agreement

Between Esprit Rafting Adventures Inc. and the Participant

THE UNDERSIGNED PARTICIPANT UNDERSTANDS AND DECLARES THE FOLLOWING:

- 1/ I, _____, acknowledge that I have voluntarily applied to participate on an Esprit Rafting Adventures Mexico program. I am aware that adventure travel to foreign countries and/or remote areas is dangerous. These dangers include, but not limited to: the forces of nature, civil unrest, political uprisings, vehicles, buses, roads, trains, planes or other means of conveyance which are not operated or maintained to standards common in Canada and/or the United States. _____
- 2/ Esprit cannot be held responsible for any act of omission, error or incident, nor any loss or damage in the event of an accident during the voyage, nor for any delay or cancellation due to fault or default of carrier. _____
- 3/ Esprit cannot be held responsible for any damages sustained by a traveler through illness, injury, loss, inconvenience or anxiety. _____
- 4/ Esprit cannot assume responsibility for any incident arising from an act of government, political uprising, strikes or fortuitous acts. _____
- 5/ Esprit will make no reimbursement for any reason for a premature return or for an incomplete expedition, nor for any services not used by the course participant. _____
- 6/ Climatic, technical or other unforeseen difficulties that might arise during the course can provoke a change in schedule or itinerary. The final decision concerning the itinerary, encampment or accommodation as well as the organization of the course lies with the course director and the program coordinators. _____
- 7/ I agree that if I am injured or become ill, Esprit may, at my cost, arrange or supply medical treatment, evacuation or any other emergency services on my behalf as Esprit deems necessary or appropriate for my safety and well being. _____
- 8/ I will not have on my person or in my possession any illegal drugs, nor shall I partake in their use at anytime throughout the duration of the program. _____

Please copy out the following statement in your own hand writing:

I DECLARE THAT I HAVE READ, UNDERSTAND AND ACCEPT EACH PARAGRAPH OF THIS AGREEMENT.

Print Name

Signature of Participant

Name of parent or guardian if participant is under 18 years of age.

Signature of Parent or Guardian



Medical Questionnaire

	<u>YES</u>	<u>NO</u>
A) DO YOU SUFFER FROM OR HAVE YOU SUFFERED? HEART DISEASE (angina, stroke, or other).....	_____	_____
EPILEPSY	_____	_____
HEMOPHILIA	_____	_____
B) DO YOU SUFFER FROM OR HAVE YOU SUFFERED? SERIOUS ALLERGIES (including nuts, peanuts, biting insects, cold induced anaphylaxis, or any others)	_____	_____
C) HAVE YOU EVER SUFFERED OR DO YOU SUFFER FROM ANY OTHER MEDICAL ISSUE OR INJURY THAT MAY EFFECT YOU ON YOUR COURSE?	_____	_____
If yes, please describe: _____ _____ _____		
D) ARE YOU PRESENTLY TAKING MEDICATION WHICH COULD ALTER YOUR PHYSICAL OR MENTAL FACULTIES?	_____	_____
If yes, do you have your medication with you?		
(e.g.: epipen, asthma inhaler, glucose....)		
E) ARE YOU PREGNANT?	_____	_____
F) ARE YOU A NERVOUS, WEAK OR NON-SWIMMER?	_____	_____

Note: If you answered yes to any of the above, you are obligated to advise Esprit before the commencement of the program.

I grant **Esprit Rafting Adventures Inc.** the right to use any photographs and/or videos in which I may appear without any compensation. _____

Participant's Name _____

Participant's Signature _____

Date (dd/mm/yy) _____



Dietary Preferences

Although we cannot guarantee special meals at all times during the program, we are usually able to accommodate most dietary requests. We make every effort to advise Esprit guides and food servers, host facilities on the road and host families in Mexico in advance of special dietary preferences. However, it is ultimately your responsibility to make your requests known locally and be aware of what foods you are consuming.

I request special meals. YES NO

* Please circle correct response.

The following foods are NOT acceptable:

* Please circle correct response(s).

RED MEAT CHICKEN FISH EGGS MILK

OTHER:

ALLERGIES TO SPECIFIC FOODS:
