

THIS IS A LEGAL DOCUMENT READ CAREFULLY BEFORE SIGNING  
PRECISION RAFTING EXPEDITIONS, INC. LIABILITY WAIVER AND RELEASE

Date: \_\_\_\_\_

In consideration of Precision Rafting Expeditions, Inc. services and / or equipment to enable me to participate in Whitewater Rafting, Duckeying, or Kayaking, or Guided Kayaking, trips, I agree as follows:

I fully understand and acknowledge that (a) risks and dangers exist in my use of Precision Rafting Expeditions, Inc. equipment and my participation in Precision Rafting Expeditions, Inc. activities;(b) my participation in such activities and / or use of such equipment may result in injury or illness including, but not limited to bodily injury, disease, strains, fractures, partial and / or total paralysis, death or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the negligence of the owners, employees, officers or agents of Precision Rafting Expeditions, Inc; the negligence of the participants, the negligence of others, accidents, breaches of contract, the forces of nature or other causes. These risks and dangers may arise from foreseeable or unforeseeable causes; and (d) by my participation in these activities and/ or use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/ or damages, whether caused in whole or in part by the negligence or other conduct of the owners, agents, officers, or employees of Precision Rafting Expeditions, Inc., or by any other person.

I, on behalf of myself, my personal representatives and my heirs hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify Precision Rafting Expeditions, Inc. and its owners, agents, officers and employees from any and all claims, actions or losses for bodily, injury, property damage, wrongful death, loss of services or otherwise which may arise out of my use of Precision Rafting Expeditions, Inc. equipment or my participation in Precision Rafting Expeditions, Inc. activities. I specifically understand that I am Releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent act or other conduct by the owners, agents, officers or employees of Precision Rafting Expeditions, Inc.

Age \_\_\_\_\_ Signature \_\_\_\_\_

Any pre-existing medical conditions? \_\_\_\_\_

NAME: (PLEASE PRINT) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE & ZIP CODE: \_\_\_\_\_

Phone Number: \_\_\_\_\_

How did you hear about us? ( Friend, brochure, word of mouth,)

# Medical Consent Form

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Name \_\_\_\_\_

Street Address \_\_\_\_\_

City/State Zip Code \_\_\_\_\_

Home Phone# \_\_\_\_\_

Business Phone# \_\_\_\_\_

Name of person to contact in case of emergency

Name \_\_\_\_\_

Home Phone#  
or Work Phone# \_\_\_\_\_

Activity Chosen \_\_\_\_\_

Do you have any medical conditions we should be aware of ?  Yes  No  
If yes please explain \_\_\_\_\_

## Medical Consent

I, \_\_\_\_\_, Hereby consent to any hospital care or medical or surgical diagnosis or first aid treatment to be rendered to me, as found advisable for the aid and treatment of any injury that may arise from my participation in the activities with the Precision Rafting Expeditions, Inc. If I am not able at that time to give my written consent due to unconsciousness, disorientation or other mental incapacity.

I also understand and agree that I am solely responsible for all appropriate charges for such services and that Precision Rafting Expeditions, Inc. Is under no duty to provide any first aid or medical treatment in any event.

\_\_\_\_\_  
Date                      Signature