



MINOR NAME \_\_\_\_\_ PARENT/GUARDIAN NAME \_\_\_\_\_  
EMERGENCY CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_

MINOR RELEASE OF LIABILITY - READ BEFORE SIGNING

**By signing this document you may be waiving your legal right to a jury trial to hold the provider legally responsible for any injuries or damages resulting from risks inherent in the sport or recreational opportunity or for any injuries or damages you may suffer due to the provider's ordinary negligence that are the result of the provider's failure to exercise reasonable care.**

In consideration of being allowed to participate in any way in the Geyser Whitewater Expeditions, Inc. program, its related events and activities, I, \_\_\_\_\_, the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participant; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of Geyser Whitewater Expeditions, Inc. immediately; and,
4. I, for myself and on behalf of my heirs, assigns personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS Geyser Whitewater Expeditions, Inc., their officers, officials, agents, and/or employees, other and lessors of premises used for the activity ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property associated with my presence or participation. WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY VOLUNTARILY WITHOUT ANY INDUCEMENT.

X \_\_\_\_\_ Age \_\_\_\_\_ Date Signed: \_\_\_\_\_

PARTICIPANT'S SIGNATURE

**FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE**

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my child and our heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

**PLEASE TURN OVER**

### Medical Conditions Release

**ATTENTION:** Your minor may not participate in Geyser Whitewater Expeditions, Inc. activities if they are  
1) under the influence of alcohol 2) under the influence of mind altering drugs or medication 3) pregnant  
4) or cannot fit into a Geyser Whitewater Expeditions, Inc. lifejacket (max torso diameter 52 inches) .

### Does your minor have any medical conditions?

Initial \_\_\_\_\_  
                    Yes                    No

**If you initialed Yes, please fill out the medical conditions release below.**

Over Geyser Whitewater Expeditions, Inc. history, many participants with a variety of medical and physical difficulties have successfully participated in our trips, but Geyser Whitewater Expeditions, Inc. should be made aware of these conditions. Failure to disclose such information could result in serious harm. All information will remain strictly confidential.

My Minor, \_\_\_\_\_ (insert name) has the following medical conditions which I understand may adversely affect me during my participation in this trip [initial all applicable]:

- \_\_\_ Cardiovascular Problems (high blood pressure, heart attack, by-pass or other surgery)
- \_\_\_ Orthopedic Injury
- \_\_\_ Asthma
- \_\_\_ Diabetes
- \_\_\_ Seizure Disorder
- \_\_\_ Drug/Alcohol Abuse
- \_\_\_ Severe Obesity
- \_\_\_ Other List \_\_\_\_\_

Please explain your minor's condition:

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**Essential Eligibility Criteria:** Geyser Whitewater Expeditions, Inc. and its owners, agents, officers and employees are not qualified to evaluate the fitness of your minor for our trips, so you must determine for your minor if they are sufficiently fit to participate. They should:

- Be in good general physical condition.
- Be capable of moderate exercise for up to 2 hours.
- Fit properly into Geyser Whitewater Expeditions, Inc. Personal Floatation Device
- With the aid of a Life jacket (PFD), be able to swim to shore in swift moving, turbulent, and cold water (35-72 degrees Fahrenheit) without the help of a guide.
- Be able to enter and exit a raft independently or with the help of a companion.
- Remained seated and balanced in raft.
- Understand the definitions of the classes of whitewater from Class I to Class VI.
- Understand that falling out of a raft, drowning or being injured in any way, is an Inherent Risk of this Raft Trip and rafting in general.
- Understand any participant can exit the raft or quit the trip at any time or point during the river trip upon request.

I have reviewed the set forth **Essential Eligibility Criteria** by Geyser Whitewater Expeditions, Inc. and certify that my minor meets all of those criteria. I, on behalf of my minor, my personal representatives and my heirs hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify Geyser Whitewater 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 result from the above initialed medical condition.

\_\_\_\_\_  
PARENT/GUARDIAN'S SIGNATURE

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date