RIVER RAT's CANOE RENTALS
Indigo Landing Road
Scranton, SC 29591
www.riverratscanoerentals.com

Date _____
Trip Time _____
Trip _____
River level _____

****************LIABILITY RELEASE AND ASSUMPTION OF RISK***************

In order to fairly and honestly inform you of the service we provide, you should know and appreciate that participation and/or use of any equipment during this trip involves certain specific risks and dangers which are inherent in river canoeing activities. These risks include loss or damage to personal property, injury or fatality, collision with an object, immersion in water, falling while onboard vessel or on shore, accidents or illnesses in remote places without medical facilities, and other unforeseeable events. There are no lifeguards posted along the river.

I, the undersigned, hereby acknowledge that I fully understand that there are inherent risks involved in river activities, as well as activities preliminary and subsequent thereto, including but not limited to the transportation to and from the river and camping. I expressly state that I assume all risks for myself and children in my care.

I understand that the rates quoted to me are based on my assumption of said risks, and that I specifically release the canoe rental, its officers, guides, agents and owners from any liability as to any right of action or claim to relief that may accrue to me or my heirs or personal representatives for any such personal injury, loss of life, loss of consortium, or loss of or damage to property, including gross negligence or reckless misconduct, which I may suffer on said river trip, the transportation to and from the river, or other activities associated with the trip. The terms hereof shall serve as a release and express assumption of risk for my heirs, executors, administrators, myself, and all members of my family including any minor accompanying me.

I further agree to be responsible for canoes, paddles, life vests, and/or other equipment issued to me; I will inspect said equipment prior to using it in order to determine if it is in a safe condition of repair and seaworthy, and I agree to return it in the same general condition. I acknowledge that I (and the children in my care) have received life vests and understand how they are to be used - If we do not understand, we will ask for proper instruction. Adults should buckle vests on small children. **We require you to wear your life preserver and you acknowledge that each person in your canoe or group understand its' proper usage.**

I authorize RiverRat's Canoe Rentals and its photographic agents to take and utilize photographs of me for the purpose of promotion and advertising.

I understand that alcohol and illegal drugs are not permitted while using RiverRat's Canoe Rentals' equipment and/or facilities.

I understand that and I and anyone for whom I sign as a Parent or Guardian must be of the required age.

I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE RIVERRATS CANOE RENTALS FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

_____ _____ Age ____
Signature of Participant **Print Name**

_____ _____ _____
Street Address **City, State** **Zip**

_____ _____
Organization Name (if applicable) **Email**

Telephone Contact Number: _____ **Date:** _____

FOR PARENTS/GUARDIANS OF A PARTICIPANT OF MINOR AGE (UNDER 18 AT TIME OF REGISTRATION)

This to certify that I, as parent/guardian with legal responsibility of this participant, do consent and agree to his/her release as provided above of RiverRats, and for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless RiverRats from any and all liability incidents to my minor child's involvement or participation in these programs as provided above, to the fullest extent permitted by law.

_____ _____ _____
Parent/Guardian **Date** **Emergency Phone Num.**

PLEASE LIST CHILDREN UNDER 18 (AND THEIR AGES ON BACK OF THIS PAGE)

FOR RIVERRAT'S USE: # OF GUIDES NEEDED _____

# OF ADULTS # OF 8-17 YR OLDS		@ @	= =	PAID _____
# OF 4-7 YR OLDS		-0-	-0-	
TOTAL				Cash __ Check __ Credit Card __