

Chula Vista Kayak Liability Form

NAME(S):

1) _____ 2) _____

3) _____ 4) _____

PHONE #: _____

DATE: _____

PLEASE INITIAL: 1) _____ ACKNOWLEDGEMENT OF RISKS AND RESPONSIBILITY: I am aware that this activity may entail risks of injury or death. I understand a description of these risks is not complete and that unknown, unanticipated risks may result in injury, illness or death. My participation in this activity is purely voluntary and I elect to participate in spite of the risks. No one is forcing me to participate or sign this waiver. I verify that I am physically fit, not under the influence of alcohol or drugs and sufficiently qualified and capable to participate in these activities. Therefore, I assume full responsibility for myself, including any minor children for which I am responsible, for bodily injury, accidents, illness, death, loss of personal property and expenses as a result of any accident which may occur.

2) _____ RELEASE OF LIABILITY: In consideration of services and/or property provided for myself and any minor children for which I am parent, legal guardian or otherwise responsible, any heirs, personal representatives or assigns, agree that: Chula Vista Kayak and each of their principals, directors, officers, agents, employees and volunteers, their insurers and each and every land owner, municipal and/or governmental agency upon whose property the activity is conducted, from all liability and waive any claim for damage arising from any cause whatsoever, including but not limited to, the negligence of the released parties, whether passive or active.

I HAVE READ THE FOREGOING ACKNOWLEDGMENT OF RISKS AND RESPONSIBILITY, AND RELEASE OF LIABILITY. I UNDERSTAND THAT BY SIGNING THIS DOCUMENT, I AM WAIVING VALUABLE LEGAL RIGHTS. I UNDERSTAND THERE WILL BE NO REFUNDS FOR PARTIAL TIME USED ONCE LEAVING WITH CHULA VISTA KAYAK RENTAL EQUIPMENT AND THERE WILL BE A CHARGE FOR GEAR NOT RETURNED OR RETURNED LATE.

SIGNATURE(s):

1) _____ 2) _____

3) _____ 4) _____

ALL RENTALS REQUIRE A DEPOSIT

CREDIT CARD #: _____ C.C.V.: _____

C.C. EXP. DATE: _____