

RELEASE FORM & VISITOR'S ACKNOWLEDGEMENT OF RISKS

In consideration of the services of Grand Canyon Expeditions, their officers, agents, employees and stockholders, and all other persons or entities associated with those businesses, (including Canyon Jetboat Services, LLC, contracted to provide guest transportation from raft to take-out point on Lake Mead at trip end, hereinafter collectively referred to as "GCE"), I agree as follows:

Although GCE has taken reasonable steps to provide me with appropriate equipment and skilled guides so I can enjoy an activity for which I may not be skilled, GCE has informed me this activity is not without risk. Certain risks are inherent in each activity and cannot be eliminated without destroying the unique character of the activity. These inherent risks are some of the same elements that contribute to the unique character of this activity and can be the cause of loss or damage to my equipment, or accidental injury, illness, or in extreme cases, permanent trauma or death. GCE does not want to frighten me or reduce my enthusiasm for this activity, but believes it is important for me to know in advance what to expect and to be informed of the inherent risks. The following describes some, but not all, of those risks.

River Running: Injury climbing in or out of the raft / dory; Rapids may cause or contribute to injury or loss of equipment; "Boats" may strike a rock or obstruction; Injury by motor or propeller.

Hiking: The degree of difficulty for each hike will vary, and always a possibility of slipping or falling. Some hikes climb over steep / mountainous cliffs and ledges where falls could result in serious injury or death.

Swimming: Swimming / floating in the Colorado River or its' tributaries subject "rapids", "shock", "exposure", "hypothermia" and even death. Undersigned will wear a life preserver at **ALL** times while on the river.

Camping: Sleeping outdoors on the ground, subject / exposed to wind, dehydration, sunstroke, stomach cramps, dietary problems, diarrhea, and other illness. Various types insects, reptiles and other wildlife may sting, be poisonous or otherwise pose a threat.

Schedule: River running, hiking, swimming, camping and related activities entail risks of injury or even death to myself.

I am aware that GCE entails risks of injury or death to any participant. I understand the description of these inherent risks is not complete and that other unknown or unanticipated inherent risks may result in injury or death. I agree to assume and accept full responsibility for the inherent risks identified herein and those inherent risks not specifically identified. My participation in this activity is purely voluntary, no one is forcing me to participate, and I elect to participate in spite of and with full knowledge of the inherent risks.

I acknowledge that engaging in this activity may require a degree of skill and knowledge different than other activities and that I have responsibilities as a participant. I acknowledge that the staff of GCE has been available to more fully explain to me the nature and physical demands of this activity and the inherent risks, hazards, and dangers associated with this activity.

I certify that I am fully capable of participating in this activity. Therefore, I assume and accept full responsibility for myself, including all minor children in my care, custody, and control, for bodily injury, death or loss of personal property and expenses as a result of those inherent risks and dangers identified herein and those inherent risks and dangers not specifically identified, or as a result of my negligence in participating in this activity.

I have carefully read, clearly understood and accepted the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding upon myself, my heirs, assigns, personal representative and estate and for all members of my family, including minor children.

TRIP DATE: _____

DATE	PRINT FULL LEGAL NAME OF PARTICIPANT	SIGNATURE**	D.O.B.
ADDRESS:			
ADDRESS:			
ADDRESS:			
ADDRESS:			
ADDRESS:			
ADDRESS:			

** Participants under 18 years, signature of parent or guardian required.

NOTES:

Photo Release: GCE may use photos or film for future promotional and/or commercial purposes.

- Will you be using GCE's recommended hotel and transportation? _____
 If not, please note otherwise: _____

- Do you have any dietary restrictions or medical conditions we need to be aware of? _____
 If yes, please explain: _____

- Do you have a National Parks Pass? _____
 If yes, please list type / number: _____