CANYON VOYAGES ADVENTURE CO.
ACKNOWLEDGEMENT OF RISKS - RELEASE OF RESPONSIBILITY – READ BEFORE SIGNING

TRIP_____DATE_____

In consideration of being allowed to participate in any way in Canyon Voyages Adventure Co. programs, 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 but not limited to slips and falls, sunburn, dehydration, drowning, cuts and bruises, 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 KNOWLINGLY 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 participation; 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 the Company 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 Canyon Voyages Adventure Co., their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners 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, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5) I understand that these activities are in remote wilderness areas and there is no immediate medical care available. Canyon Voyages Adventure Co. does not carry Epi pens or Epinephrine.
6) Canyon Voyages Adventure Co. does not provide cell phone service or satellite phone service.
7) The Venue of any dispute that may arise out of this agreement or otherwise between the parties to which Canyon Voyages Adventure Co. or its agents is a party shall be either the City of Moab, Utah Justice Court or the County or State Supreme Court in Grand County.

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

NAMES OF ALL ADULT (age 18 or over) PARTICIPANTS:

1)_____
Name (PLEASE PRINT) Mailing Address City/State/Zip Country

_____ _____
Signature Optional: Email Address