**DIGITAL RITA KLUGE TOURS LIABILITY WAIVER FORM**

I hereby release RITA KLUGE TOURS, its employees and agents and any contracted service providers from all claims and actions that I/we have or may have at any time in the future against them or any of them, howsoever arising, for bodily injury or death, that I/ we may suffer as a result of my/our participation in any trip organised with, or in conjunction with RITA KLUGE TOURS.

I also acknowledge that the risks involved in remote and adventurous travel, in addition to the usual dangers and risks inherent, has certain additional dangers and risks, including but not limited to:

* Temperature extremes (hot or cold)
* Sudden movements of boat / vehicle
* Extreme weather which can be subject to unexpected & sudden changes
* Physical exertion for which I may be unprepared
* Lack of medical services in a remote location
* Challenges with evacuation

I accept these, as well as all the inherent risks of the proposed tour and the possibility of bodily injury or death, property damage or loss resulting there from.

I acknowledge that the excitement of adventure travel is derived in part from the inherent risks incurred by travel and activity beyond the accepted safety of life at home or work, and that these inherent risks contribute to such enjoyment and excitement, being a reason for my participation.

I agree that I am participating voluntarily, and that the risks are clear to me. Additionally, I do not have any conditions that will increase my risk of experiencing injuries whilst engaging in this activity. It is my responsibility to decide whether or not to engage in activities on any given day.

Should any equipment be provided to me (e.g. mask, snorkel, fins), I will examine it to ensure it is in good working condition prior to use.

I will obey safety precautions as explained to me verbally. I will ask for clarification if needed.

I am accountable for my own insurance (life, medical, health or travel).

I confirm that I am over the age of 18 years and that I have read and also understand the terms and conditions of contract and this Agreement prior to signing it and agree that this Agreement will be binding upon my heirs, next of kin, executors, governed in all respects by and interpreted in accordance with the law of the Commonwealth of AUSTRALIA.

If I am under 18 years, my legal guardian or parent will accompany me and assume all responsibility for signing this on my behalf.

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By signing below, I forfeit the right to bring a suit against RITA KLUGE TOURS

for any reason.

**Full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**If under 18:**

**Parent/guardian name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/guardian signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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