



Vancouver Island - Yours to discover!

Waiver and Release of Liability

In consideration of being allowed to participate in any way in the adventure tourism activities and related events of Grand Vista Tours Inc. and Grand Vista Tours & Events the undersigned acknowledges, appreciates, and agrees that:

I knowingly agree to assume any and all risks known and unknown arising out of or incident to such participation.

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless Grand Vista Tours Inc. and Grand Vista Tours & Events, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event from any and all claims, damages, losses, expenses or injuries including reasonable attorney fees incurred on behalf of Grand Vista Tours Inc. and Grand Vista Tours & Events, arising out of or incident of such participation in this adventure tourism activity.

I understand that my participation in any sailing or boating activities is as a student for learning purposes.

I hereby represent that I understand and am familiar with the nature of the activities in which I will be participating in this activity tourism, that I am in good physical health and that I do not have any physical or emotional conditions past or present, of which I am aware which would in any way affect my ability to participate in this activity tourism.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT AND FULLY UNDERSTAND ITS TERMS.

Participant's name: \_\_\_\_\_

Street: \_\_\_\_\_ City/Town: \_\_\_\_\_

Prov/State: \_\_\_\_\_ Country: \_\_\_\_\_ Postal/Zip code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Hotel/Resort: \_\_\_\_\_ Room #: \_\_\_\_\_

X \_\_\_\_\_
PARTICIPANT'S SIGNATURE

\_\_\_\_\_
DATE SIGNED

FOR PARTICIPANTS OF MINORITY AGE
(Under age 18 at time of registration)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releases, and, for myself, my heir, assign, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above.

PARTICIPANT'S NAME (Print): \_\_\_\_\_

\_\_\_\_\_
EMERGENCY TELEPHONE NUMBER

X \_\_\_\_\_
PARENT / GUARDIAN SIGNATURE

\_\_\_\_\_
DATE SIGNED

Bus: (250) 752-3414
Fax: (250) 954-3476
Toll Free: 1-866-753-3414

www.grandvistatours.com
info@grandvistatours.com

Grand Vista Tours Inc.
P.O. Box 493, Qualicum Beach, British Columbia, Canada V9K 1T1