

CLIP N ZIP CANOPY

Dixon Cove, Roatan
Honduras, Central America

Liability Waiver

THIS RELEASE MAY BE USED AGAINST YOU IN A COURT OF LAW .

(Please read carefully, fill in all blanks and initial each paragraph before signing.)

___ I understand and agree that neither my instructors, canopy guides and the facility through which I conduct the canopy tour, CLIP N ZIP CANOPY, nor any of their respective employees, officers, agents or assigns, (hereafter referred to as. "Release Parties") may be held liable or responsible in any way for any injury death or other damages ; to me or my family, heirs, or assigns that may occur as a result of my participation in, the canopy tour or as a result of the negligence of any party including the release parties, whether passive or active.

___ I am physically fit and able to partake in the canopy

___ I am not pregnant ..

___ I do not have current back problems such as herniated disks, previous back or neck surgery, or limited mobility with raising my arms.

___ I do not suffer from anxiety; or panic attacks, nor do I have heart problems that are being treated with medication.

___ I do not suffer from epilepsy nor seizures of any type.

___ I have not consumed drugs or other chemicals that could impair my ability to participate in the canopy tour.

___ I understand that the canopy tour is a physically strenuous activity and that I will be exerting myself during the canopy tour and that if I am injured as a result; of a heart attack, panic, hyperventilation, etc., that I expressly assume the risk of said injuries and that I will not hold the above listed individuals or companies responsible for the same.

I _____, hereby affirm that I have been advised and thoroughly informed of the inherent hazards of the canopy tour.

___ In consideration of being allowed to partake in the canopy tour, I hereby personally assume all risks in connection with the canopy tour for any harm, injury, or damage that may befall me while participating in the canopy tour, including all risks connected therewith, whether foreseen or unforeseen.

___ I further save and hold harmless said release parties from any claim or lawsuit by me, my family, estate, heirs, or assigns arising out of my participation the canopy tour including both claims arising during the canopy tour.

___ I further state that I am of lawful age and legally competent to sign this liability and release, or that I have acquired the written consent of my parent or guardian .

___ I understand that the term herein is contractual and not a mere recital and that I have signed this document of my own free act."

IT IS THE INTENT OF _____:BY THIS INSTRUMENT TO EXEMPT AND RELEASE MY INSTRUCTORS AND GUIDES, THE FACILITY OF "CLIP N ZIP CANOPY" AND ALL RELATED ENTITIES AS DEFINED ABOVE, FROM ALL LIABILITY OR RESPONSIBILITY WHATSOEVER FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH HOWEVER CAUSED, INCLUDING, BUT NOT LIMITED TO, THE NEGLIGENCE OF THE RELEASE PARTIES, WHETHER PASSIVE OR INACTIVE .

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE AND EXPRESS ASSUMPTION OF RISKS BY READING IT BEFORE I SIGN- IT ON BEHALF OF MY HEIRS AND MYSELF.

Signature

Signature of parent or guardian(where applicable)

Date

Date