

COVENANT OF GOOD FAITH:

I recognize that you, provider of services, will operate under covenant of good faith and fair dealing, but you may find it necessary to terminate an activity due to forces of nature, medical necessities or other problems; and/ or refuse or terminate, the participation of any person you judge to be incapable of meeting the rigors or requirements of participating in the activity. I accept your right to take such actions for the safety of myself and/ or other panicipants.

AUTHORIZATION:

I hereby authorize any medical treatment deemed necessary in the event of any injury while participating in the activity. I either have appropriate insurance or, in its absence, agree to pay all costs of rescue and/ or medical services as may be inrurred on my/ our behalf. I agree to any film or photographs of me/ us as participants, become your propeny and may be used for promotional or commercial purposes.

RELEASE:

In consideration of services or propeny provided, I, for myself and any minor children for which I am legal guardian or otherwise resoonsible. anv heirs, personal representatives or assigns, agree that, *KAYAK MENDOCINO*, its principals, directors, officers; agents, employees and volunteers, their insurers and each and every land owner, municipal and/or governmental agency upon whose property an activity is conducted and their insurers, if any, shall have no liability of any nature for any and all damage to me and other persons or propenies as a result of any acts, omissions or negligence of the "owner" or any other person (including myself) or entity and I hereby release and discharge the owner and insurer, if any, for any such damage.

RENTALS:

I/we agree to stay within the area defined by the personnel of *KAYAK MENDOCINO*.

I HAVE READ THE ACKNOWLEDGMENT OF RISKS. ASSUMPTION OF RISK AND RESPONSIBILITY AND RELEASE OF LIABILITY. I UNDERSTAND THAT BY SIGNING TI-IIS DOCUMENT I MAY BE WAIVING VALUABLE LEGAL RIGHTS.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

In emergency contact: _____

I am signing for and I am the parent or legal guardian for the following minor (under 18) parricipants: _____

How did you hear about us? _____.

Signature: _____ Date: _____