

We're excited that you've decided to travel with Shutter Click Adventures, we can't wait!

First, we need to get through some formalities to get you all set to go on your next Photo Adventure. Please take a few minutes to read and agree to the following agreement. Each person that will be traveling will need to read and sign this agreement.

Please complete this form as legibly as possible using large print and heavy ink as this form may need to be faxed internationally.

Completion of this form is mandatory for trip participation and must be returned to our office at least 90 days prior to departure.

## **Agreement**

In consideration of Shutter Click Adventures furnishing services and/or equipment that enables me to participate in a Photo Adventure, I agree as follows:

I fully understand and acknowledge that outdoor recreational activities have (a) inherent risk, dangers and hazards and such exist in my use of Shutter Click Adventures equipment and my participation in Shutter Click Adventures activities; (b) my participation in such activities and/or use of such equipment may result in injury or illness including, but not limited to bodily injury, disease, strains, fractures, partial and/or total paralysis, death or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the negligence of the owners, employees, officers or agents of Shutter Click Adventures: the negligence of the participants, the negligence of others, accidents, breaches of contract, the forces of nature or other causes. Risks and dangers may arise from foreseeable or unforeseeable causes including, but not limited to, guide decision making, including that a guide may misjudge terrain, weather, trail or lake and river route location, and water level, risks of falling out of or drowning while in a canoe or kayak and such other risks, hazards and dangers that are integral to recreational activities and/or use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or part by negligence or other conduct of the owners, agents, officers, or employees of Shutter Click Adventures, or by any other persons.

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS Shutter Click Adventures, LLC., its officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event (RELEASEES), from any and all claims, demands, losses, and liability of property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. I permit the use of any photos, slides, films, and sketches of myself/him/her taken during the day's activities for publicity, advertising, promotion or other commercial purpose. I further understand that I am responsible for any damage done to equipment. The above agreement shall be binding on my heirs, successors, assigns, administrators and executors. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS,

UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Do you have or are you planning to get Travel Insurance? \_\_\_ Yes \_\_\_ No

Shutter Click Adventures

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

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Age: \_\_\_\_\_

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

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Parent/Guardian Signature:**

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 all Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liability incidents to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Parent/Guardian NAME (Printed): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

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

Emergency Phone: \_\_\_\_\_

Minor Participant's Name (Printed): \_\_\_\_\_

Age: \_\_\_\_\_