

Adult Waiver

Release and Acknowledgment of Risk

In consideration of the services of Inshore Slam Kayak Fishing, LLC, its owners, volunteers, participants, employees, and all other persons or entities acting on its behalf (hereinafter collectively referred to as "ISKF"), I hereby agree to release and discharge ISKF, on behalf of myself, my parents, my heirs, assigned personal representatives and estate as follows:

I acknowledge that kayaking entails known and unanticipated risks which could result in severe physical or emotional injury, paralysis, death or damage to myself, property, or to third parties. These risks include, but are not limited to: capsize, collision with objects or other water craft, exposure to turbulent water, rain and cold, contact with poisonous or injurious plants, venomous and/or aggressive animals, and illness in remote areas where definitive medical care might be delayed. These and other unforeseen risks could result in severe injury or death from hypothermia, accidental drowning, or trauma to skeletal, muscular, nervous, circulatory, respiratory and lymphatic systems. Furthermore, ISKF guides have difficult jobs to perform. They seek safety, but are not infallible. They might be ignorant of a participant's fitness or abilities. They might misjudge the weather, the elements or the terrain. They may give inadequate warnings or instructions, and the equipment being used might malfunction.

- I expressly agree to accept and assume all of the risks existing in this activity. My participation in the activity is purely voluntary, and I elect to participate in spite of the risks.
- I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless ISKF from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of ISKF's equipment or facilities, including any such claims which allege negligent acts or omissions of ISKF.
- I certify that I have insurance to cover any injury or damage I might cause or suffer while participating, or else agree to bear the costs of such injury or damage myself. I further certify that I have no medical or physical conditions which could interfere with my safety in this activity, or else I am willing to assume, and bear the cost of, all risks that may be created, directly or indirectly, by any such condition. I further certify that I am not under the influence of drugs or alcohol.
- I am responsible for replacement cost for any equipment lost or damage due to my negligence.
- I agree that ISKF may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have had sufficient opportunity to read this entire document. I have read and understood it and agree to be bound by its terms. PLEASE PRINT LEGIBLY.

Signature	
Print Name	Date
Email	
Emergency Contact (Name & Phone#	·)

"PLEASE FEEL FREE TO TIP YOUR GUIDE ACCORDING TO PERFORMANCE"