

WAIVER

Name:
In consideration of Adventure Aid (hereinafter known as the organiser) arranging
a volunteer trip on my behalf from to (dates) at one or more of the
following locations; Nepal / Sumatra / Tanzania / India / Mauritius (delete as appropriate)
I hereby agree to the following:

Participation and Potential Dangers

By participation in this humanitarian trip, made under the arrangements of Adventure Aid ("the Organiser") I acknowledge the danger of any adventure travel activity, including but not limited to; dangers in general road driving, driving on private roads, food poisoning or related illness, animal-borne tropical diseases, travelling along mountainous roads, high altitude, forces of nature, civil unrest, terrorism, travel across water by hovercraft, ferry or similar vessel, accident or illness without means for rapid evacuation or medical facilities, earthquakes, tsunamis and random acts of violence, or areas inadequate or lacking law enforcement.

I understand that my personal safety cannot be guaranteed, and I accept the risks involved in living and traveling in conditions made dangerous by disease and any and all other hazards. I represent to the Organiser that I have no physical, mental or emotional conditions that would put either myself or others at risk in the above circumstances, and I agree to authorise the release of any medical, psychological or other information to The Organiser if it so requests.

Medical Attention / Conditions

In a situation where I require urgent medical attention due to illness or injury but am unable to make such decisions for myself, I willingly give The Organiser the authority to make such decisions on my behalf (unless I give specific alternative instructions prior to departure).

Rules / Regulations and Indemnity

I understand that all the applicable rules, guidelines, instructions and policies of The Organiser must be followed and that the responsibility for my personal safety remains with me. I further undertake and agree to remove myself from participation in the trip if I sense or observe any unusual hazard or unsafe condition, or if, at any time, I feel unable or unfit to safely continue for any reason.

I agree to indemnify the organiser, its trustees, agents, employees, licensees and assignees, and the event sponsor from all claims, demands, or expenses as a result of my breaching this Waiver or guidelines for the trip, my negligence or otherwise arising out of my participation in the trip.

Personal Injury / Risk / Death

I understand that in the event of my suffering any personal injury or death (other than personal injury or death caused by the Organiser's negligence) or any damage being caused to any property of mine, that I will not bring any action or other proceedings against the Organiser, its trustees, agents, employees, licensees or assignees, event sponsors, or any company or persons associated with the trip.

I acknowledge that there exists inherent risk in participating in such any trip as arranged by the Organiser. The organiser will use its reasonable endeavours to ensure that the other participants abide by these rules, but cannot guarantee that this will be done.

Except for death or personal injury caused by the Organiser's negligence, which is not excluded or limited by anything in this waiver, Adventure Aid, its trustees and employees exclude all liability in relation to my participation in the trip.

Affirmation

I accept the charity's rules prevails.	decision in an	y dispute o	r discussion	over app	lication of	the
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necessary pre-trip addressed suitably;		oaperwork	and had a	ny ques	tions/que	ries

Prior to departure I will have suitably travel insurance in place and have had all recommended vaccinations and made the charity fully aware of any medical conditions I have or medication I am taking;

I understand that once flights are booked for the trip that the minimum donation required of £1700 is due eight weeks before departure and is not refundable but that all efforts will be made by The Organiser to re-sell my place in the team and refund any monies given by me minus the £200 non-refundable deposit along with any other charges or costs that cannot be recuperated.

I HAVE CAREFULLY READ AND UNDERSTOOD THE GENERAL ASSUMPTIONS OF RISK AND WAIVER

By appending your signature below, you indicate and confirm that you have read and agree the above (and have considered taking independent legal advice of your own volition should you wish to do so)

SIGNATURE
PRINT NAME
DATED
PRIMARY CONTACT ADDRESS AND TELEPHONE NUMBER: