Please check one:		4011	\C T		
Ecoadventure Ziplining			プリ ー		FFICE USE ONLY
5 ziplines, 5 canopy bridges and hiking. AM & PM session: \$119 + tax		EXPERIENCES	& TOURS	Session: AM	☐ PM ☐ SUNSE
Ecoadventure Cave Rappelling & Zipli		RATION F	ORM	Total Price: \$	
3 ziplines, 3 canopy bridges, 8x8 vehicle, cave ra \$129pp + tax	appell, hiking.				
Ecoadventure Sunset Ziplining					
5 ziplines, 5 canopy bridges and hiking: \$119pp + tax				Fareharbor Paid	Deposit:
Name			Cellular	#	
Home Address				"	
Phone # while in Puerto Rico					
Hotel					
Date of Activity					
Number of Participants	Age Range	Ecoadventure Zi	olining and Ecoa	dventure Sunset Ziplining	age range accepted: 7-68
How did you know about us? 🖵 In	_				
Credit Card Information:					
Name (as it appears on the CC)	Bank _		_ Card typ	e: 🖵 Visa 📮 Ma	asterCard 🖵 Discove
Credit Card Number					
Cost of Activity: USD\$					with credit card
Reservation Terms and Cor 1) Credit card required for reservation (Visa A 2% in-house processing fee will be ad 2) Ecoquest requires 24 hours notice prior Cancellations with more than 24 hours not participant behavior which threatens the amount of the activity. There is a 20% co Participants must have good health and The tourists will be ziplining thru elevated If you have a medical or physical condition Due to size restrictions on our harnesses elements at our tours. Ecoquest reserve concerns about your ability to participate to an undisclosed medical or physical cod Arriving more than 15 minutes late is cor We're not responsible for items left in our 15% gratuity tips are access.	or MasterCard). Cash is accepted if paying with credit card. It to scheduled departure time to anotice will be charged a 20% corright to cancel any activity due to the right to cancel the activity safety of the group. In this case ancellation fee. physical condition. Participants a heights, travelling on uneven in which makes participating in the and other technical equipment, as the right to cancel or limit you be safely, speak with our staff about the condition you will be responsible insidered a cancellation.	cancel your reservancellation fee. Cancel to adverse weather of y at any time in the earthe person(s) whose with recent injuries, rugged terrain, standese activities dangero we're not able to act participation based and of time. If you he to pay the full amounts	tion or to chan ellations with les conditions. If thi event of disorde behavior is de surgeries and/o ing near steep us for you, unfor commodate pe d on your physi ave to cancel y	ge the number of particist than 24 hours notice wishappens, you will not be rely conduct, drug or alcommend responsible will be pregnancies are not publicated and cliffs and hill tunately you will not be copple weighing over 230 cal condition. If you have	pants in your group. Il be charged the full amount, be charged for the activity, ohol use, or any other be charged the full bermitted in this activity, king over sustained hills, able to participate. It pounds on ziplining the any questions or
I certify that the information given		the terms and co	nditions spec		amount noted above.
	Signature			Date	



Name of Participant:	Age:
Address:	
In case of emergency please contact:	
Name: Telephone:	- x = 004 - 2004 x 104 0 2 3
Do you have any medical conditions we should know about?	
If yes, please explain:	
Are you pregnant? Yes No	
Are you taking any medications?	
If yes, please indicate name(s) of the medication(s):	
Are you allergic to any medication? \square Yes \square No	
If yes, please specify medication(s):	
Are you allergic to bee stings? The Yes The No	
Are you allergic to any plants? 🔲 Yes 🔲 No	
Do you have food allergies?	
If yes, please specify:	
If necessary, will you accept medical treatment? Yes No	
Participant's Signature: Date:	



PARTICIPANT AGREEMENT, RELEASE, AND ASSUMPTION OF RISK

In consideration of the services of Ecoquest Inc., their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "EQ"), I hereby agree to release, indemnify, and discharge EQ, on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that my participation in outdoor adventure based activities such as climbing, hiking, touring, zip lines, rappelling, off road tours, caving, boating, canoeing, and surfing entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

The risks include, among other things: Slipping and falling; hazards of walking on uneven terrain; falling objects; exhaustion; exposure to temperature and weather extremes which could cause hypothermia, drowning, hyperthermia (heat related illnesses), cranial and skeletal injuries, heat exhaustion, sunburn, dehydration; and exposure to potentially dangerous wild animals, insect bites, and hazardous plant life; limited visibility; vertical falls, confined spaces, entrapment, potential flooding, water hazards; being struck by objects dislodged or thrown from above; rope burns; pinches, scrapes, twists and jolts that could result in scratches, bruises, sprains, lacerations, fractures, or concussions; accidents or illness can occur in remote places without medical facilities and emergency treatment or other services rendered; consumption of food or drink; failure; improper alifting or carrying; my own physical condition, and the physical exertion associated with this activity.

Furthermore, EQ employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They might misjudge the weather or other environmental conditions. They may give incomplete warnings or instructions, and the equipment being used might malfunction.

- 2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.
- 3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless EQ 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 EQ's equipment or facilities, including any such claims which allege negligent acts or omissions of EQ.
- 4. Should EQ or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
- 5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.
- 6. In the event that I file a lawsuit against EQ, I agree to do so solely in the state of Puerto Rico, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against EQ on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

Pr

In

Print Name:	Phone Number:				
Address:					
State:	Zip:	Email:			
Participant:	Signature:		Date:		
	PARENT'S OR GUARDIAN'S AD (Must be completed for partic				
In consideration of activities and to use its equipment an or on behalf of Minor, and which are in any	d facilities, I further agree to indemn	ify and hold harmless	name) ("Minor") being permitted by EQ to participate in its EQ from any and all claims which are brought by,		
Parent or Guardian:	Print Name:		Date:		