

EcoQUEST

adventures & tours

MEDICAL FILE

Name of Participant: _____ Age: _____

Address: _____

In case of emergency please contact:

Name: _____ Telephone: _____

Do you have any medical conditions we should know about? ☐ Yes ☐ No

If yes, please explain: _____

Are you pregnant? ☐ Yes ☐ No

Are you taking any medications? ☐ Yes ☐ No

If yes, please indicate name(s) of the medication(s): _____

Are you allergic to any medication? ☐ Yes ☐ No

If yes, please specify medication(s): _____

Are you allergic to bee stings? ☐ Yes ☐ No

Are you allergic to any plants? ☐ Yes ☐ No

Do you have food allergies? ☐ Yes ☐ No

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 lifting 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.

Print Name: _____ Phone Number: _____

Address: _____

State: _____ Zip: _____ Email: _____

Participant: _____ Signature: _____ Date: _____

PARENT'S OR GUARDIAN'S ADDITIONAL INDEMNIFICATION

(Must be completed for participants under the age of 18)

In consideration of _____ (print minor's name) ("Minor") being permitted by EQ to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless EQ from any and all claims which are brought by, or on behalf of Minor, and which are in any way connected with such use or participation by Minor.

Parent or Guardian: _____ Print Name: _____ Date: _____