

2018

PARTICIPANT AND LIABILITY WAIVER

Please fill out one form per person

This information is strictly confidential and for Kellam Road Trips LLC only

LIABILITY (MUST SIGN)

Please Print Below

Date of Birth _____ / _____ / _____

Last Name _____ **First Name** _____ **Middle Initial** _____

Address _____ **City** _____

State _____ **Zip** _____

Phones: Home _____ **Cell** _____ **Work** _____

E-Mail Address _____

General/Medical

This information will only be used in the unlikely event of a medical emergency while you are on our trip.

Emergency Contact Name _____

Phone Number _____ **Relationship** _____

Medical Conditions/Disabilities we need to be aware of _____

Medications we need to be aware of _____

Medical Allergies we need to be aware of _____

Kellam Road Trips LLC acts as an agent in arranging transportation, lodging, meals and tours. Kellam Road Trips is not responsible for delays, cancellations, damages, injuries, or loss of belongings that may occur to any participant or their guests attending any of our events due to weather, supplier default, or theft. We reserve the right to change or cancel any trip at any time for the safety or lack of interest of trip participants. Kellam Road Trips also reserves the right to exclude or terminate the trip of any person who is disruptive and/or causes difficulty to the trip host and/or other trip participants. Travel expenses related to such termination is the sole responsibility of the terminated trip participant. Upon signing this document, the participant expresses and releases the above agency, paid individuals and volunteers from any and all claims from such loss, damage or injury.

SIGNATURE _____ (Parent or guardian if under 18 yrs.)

DATE _____ / _____ / _____