



Otago Guest Participation Agreement

I have chosen to participate in an adventure trip offered by Otago, LLC, a Vermont limited liability company (hereinafter "Otago"), doing business as (please select one): ____ Country Walkers, or CW, (hereinafter "CW"); or ____ VBT Bicycling and Walking Vacations, VBT, or VBT, (hereinafter "VBT"), scheduled to begin on _____, 20____ (**the "Program"**).

In consideration for the right to participate in the Program, I agree as follows:

Statement of understanding. Although Otago has made reasonable efforts to assure my safety while participating in the Program and activities offered as a part of the Program, I understand that there are certain risks, dangers, and hazards that are inherent to participation in the Program. These include, but are not limited to, physical and mental fatigue; slips, falls, and collisions; encounters with wild animals, varied terrain, and environmental features; altitude related illness; changing weather conditions; natural disasters; criminal acts of third parties; acts or omissions of the public or other Program participants; and accidents occurring during travel associated with the Program. Encountering these risks, dangers, and hazards could result in physical injuries or damage to personal property. I understand that it is impossible for Otago to list in this Agreement every inherent risk, danger, or hazard associated with participating in the Program. I understand and appreciate, however, that I may encounter these and other inherent risks, dangers, and hazards not specifically listed in this Agreement at any time during the Program.

Assumption of the risk. I accept and assume all of the inherent risks, dangers, and hazards associated with participating in the Program, whether known or unknown, including those specifically identified above.

Responsibility for conduct. I accept and assume responsibility for my own negligent or reckless conduct while participating in the Program. I understand that Otago accepts and assumes responsibility for its own negligent or reckless conduct.

Fitness to participate. Otago recommends that I consult with a physician before participating in the Program. It is my own responsibility to determine whether the Program is suitable for me.

Equipment. Otago may provide me with equipment for my use during the Program. Otago checks this equipment before each tour; however, I am responsible for checking the equipment upon receipt, as well as alerting tour guides of any change in the condition of the equipment that may occur during my use. I understand that I am in exclusive control of any such equipment once Otago provides it to me.

Additional terms. Additional terms and conditions apply to the Program. These are available for review for CW at www.countrywalkers.com/terms-conditions/ and for VBT at www.vbt.com/terms-conditions/, and are incorporated into this Agreement by this reference.

Program Changes. Otago strives to maintain the Program as originally advertised. On occasion, conditions beyond the control of Otago may necessitate changes, modifications, or alterations to the Program's itinerary; the substitution of accommodations; or the omission or substitution of specific advertised activities. Otago may make such decisions in its sole discretion, and is not responsible or liable for any expenses or losses that may result from those decisions. Otago additionally reserves the right to restrict participation in any activity associated with the Program in the event it determines that participation may affect, impede, or endanger my welfare, or the welfare or enjoyment of another participant. Otago is not responsible for any losses or costs that may result from exercising this right.

Governing law and forum selection. This Agreement is governed in all respects by the laws of the **State of Colorado**, which is the state in which Otago's parent companies are headquartered. Any claim or dispute related to the subject matter of this Agreement must be resolved exclusively by a state or federal court located in the **State of Colorado**.

I acknowledge with my signature below that I have reviewed and do understand and accept this Agreement. (Please print name, sign, and date.)

Name: _____	Signature: _____	Date: _____
Name: _____	Signature: _____	Date: _____

Participants under 18. I, as parent/guardian of the minor(s) identified below, give consent with my signature above for the minor(s) to participate in the Program and agree in my capacity as parent/guardian to be bound by the terms of this Agreement.

Minors' Names: _____