



Guest Information Form

Please complete both sides of this form, then return to our office at least three weeks before your trip.

Rogue River Trail Trip Date _____ Reservation in name of _____

Your Name _____ Phone (home) _____

Address _____ Phone (work) _____

City _____ State _____ Zip _____ Fax # _____

Date of Birth _____

Medical Conditions - If you have a history of heart troubles, asthma, diabetes, epilepsy, or allergy to insect bites or stings, or must take daily prescription drugs, please provide information in the space provided, or on a separate sheet. Anyone with a potentially serious medical condition should consult a physician before signing up for a wilderness hiking trip.

Medical or Dietary Restrictions _____

Person to contact in case of emergency _____ relationship _____

Contact phone number(s) _____

The Rogue River Trail provides for a delightful, exceptionally beautiful wilderness hike. But the trail can present challenges and difficulties as well as delights. In general the elevations encountered are low (starting with 689 feet at the trailhead), but the trail climbs and drops multiple times, and sections of the trail are rocky. Though the trail is of moderate difficulty overall, participants may find certain sections of the trail more challenging. Hikers should be prepared for conditions such as including loose gravel, washouts, and down trees. Also, while some sections of the trail are relatively level and tucked into the forest, other sections, while reasonably safe, are narrow and 50 to several hundred feet or more above the river, so hikers who are particularly afraid of heights may find these sections of trail to be difficult. Additionally, poison oak grows in places along the trail, and ticks may be present. For protection from both we recommend you consider hiking in long pants and a long-sleeved shirt.

Be sure to wear boots that have been well broken in, and make sure that you are capable of hiking 10 miles a day at a moderate pace over uneven terrain. (Most days are shorter hikes, but you should be capable of a hike of this length.)

Please tell us a little about your hiking experience: _____



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563-1500 ~

www.oregonriver.com

OutRecX LLC dba Oregon River Experiences Participant Agreement Release and Acknowledgment of Risk

IMPORTANT. READ THIS DOCUMENT CAREFULLY BEFORE SIGNING

In consideration of being permitted to participate in any way in an OutRecX^{LLC} (hereby referred to as Oregon River Experiences; O.R.E.) wilderness hike, I, the under-signed, acknowledge, appreciate and agree that:

I. Certain risks are inherent in trail hiking and wilderness travel, and that while particular skills, equipment, and personal discipline may reduce this risk, the risk of serious injury or death does exist.

The following describes some (but not all) of these risks: : hazardous conditions on the trail, including uneven surfaces, narrow trails, obstructions from plants, trees, rocks and other flora and fauna; hazards caused by unfavorable weather conditions, the acts of wild animals, allergic reaction resulting from contact with poisonous plants or insect stings; consumption of alcoholic beverages, tainted food, or non-potable water; heat exhaustion or heat prostration, hypothermia, , or any other weather related exposure; strains or trauma caused by slipping and falling, overexertion, or carelessness on the part of the participant; my own negligence and/or the negligence of others, including tour guides, other guests, O.R.E. employees, agents and/or representatives; misjudgment of terrain, rapids, weather, trails, and route location; high altitude; fatigue, chill, overheating, and/or dizziness, which may diminish my own reaction time and increase the risk of accident; known or unknown medical conditions, physical excursion for which I am not prepared or other such accidents; the negligence or lack of adequate training of any agents or employees of O.R.E. who seek to assist with medical or other help either before or after injuries have occurred; the lack of immediate medical assistance due to the remoteness of the river canyon; and the adequacy and

II. By signing below I certify that I am aware that trail hiking and wilderness travel entails risks of injury or death to myself. I understand that the above description of these risks is not complete and that other unknown or unanticipated risks may result in injury or death. I knowingly and freely assume all such risks and assume full responsibility for my participation; and

III. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of O.R.E. immediately; and

IV. I hereby consent to emergency medical treatment if I am injured while participating in the O.R.E. Hike, and I hereby release O.R.E. from any and all liability arising from its obtaining medical care on my behalf or transporting me to a medical facility. I further agree to pay all costs associated with such care or transportation. Without limiting any of the foregoing, I expressly waive any claim that I or anyone on my behalf may bring against O.R.E. with regard to medical care and the provision or failure to provide such care.

V. I for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release, indemnify and hold harmless OutRecX^{LLC} dba O.R.E. and its officers, employees, participants, owners and volunteers with respect to any and all injury, disability, death, or loss or damage of person or property associated with my presence or participation, to the fullest extent permitted by law. Furthermore, without limitation, O.R.E. is not responsible for any injury, loss, or damage to person or property, death, delay or inconvenience in connection with the provision of any goods or services occasioned by or resulting from, but not limited to, acts of God or force majeure, acts of war or civil unrest, insurrection or revolt, strikes or other labor activities, criminal or terrorist activities of any kind. By entering into this Agreement, I am not relying on any oral or written representation or statements made by O.R.E. other than what is set forth in this Agreement.

I agree that any dispute concerning, relating, or referring to this agreement, or the trip itself shall be resolved exclusively in a court of competent jurisdiction in Oregon. Such proceedings will be governed by Oregon law. The parties understand and agree that all claims must be brought within six months following the completion of the hike. All claims brought more than six months after the completion of the hike are forever waived and cannot be pursued in another forum.

I HAVE CAREFULLY READ THIS DOCUMENT, FULLY UNDERSTAND ITS TERMS AND LEGAL RAMIFICATIONS, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. I agree that if any portion is found to be void or unenforceable, the remaining portions shall remain in full force and effect. No additions, deletions or changes can be made to the release form, and signing it is a requirement for joining the hike.

Name (please print)

Signature

Date signed

FOR PARENTS/GUARDIANS OF PARTICIPANTS UNDER AGE 18

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above, and, for myself, my child and our heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the releasees from any and all liabilities incident to my minor child's involvement or participation in this trip as provided above, even if arising from the negligence of the releasees, to the fullest extent permitted by law.

Parent/Guardian's Name

Parent/Guardian's Signature

Date signed