



Guest Information Form

(Day Trips)

Please complete both sides of this form, then return to our office at least 7 weeks before your trip. If less than seven days, please call our office or complete the form online.

River _____ Trip Date _____ Reservation
in name of _____

Your Name _____ Phone # _____
Home Work Cell (please circle one)

Address _____ Phone # _____
Home Work Cell (please circle one)

City _____ State _____ Zip _____ Email _____

Height: _____ Weight: _____ Shoe Size: _____ Age: _____

Have you been rafting before? Y N Have you been rafting with O.R.E.? Y N Do you know how to swim? Y N

How did you first hear about O.R.E.? _____

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 river trip.*

Medical or Dietary Restrictions _____

Person to contact in case of emergency _____
Relationship _____ Phone (home) _____ Phone (work) _____

OutRecX LLC

Participant Agreement and Acknowledgment of Risk

✓ **IMPORTANT. READ THIS DOCUMENT CAREFULLY.**

You are about to embark on a whitewater raft trip with OutRecX LLC dba Oregon River Experiences (hereby referred to as O.R.E.). We are proud of our safety record. However, certain risks are inherent in river running. By signing this statement, you acknowledge your understanding that these risks exist, and you agree to accept responsibility for your own welfare.

The following describes some (but not all) of these risks:

— Whitewater rapids will be encountered. You could be jolted, bounced, or otherwise shaken during rides through some of these rapids. It is possible that you could be injured due to collision with a portion of the interior of a raft or other equipment necessary to the operation of the trip, or due to collision with other trip participants.

— Your boat could turn over, or you could be washed overboard, as the result of unexpected wave action, or due to a misjudgment of the rapid on the part of your guide, yourself, or another trip participant. This could result in mental anguish, or lead to injuries, prolonged exposure to cold water, or other conditions leading to impaired health or death, by drowning or other causes.

— Boats may be slippery, and you could injure yourself or damage or lose equipment by falling into the river or against an object while climbing into or out of a boat.

— Accidents could occur on land. You could slip and fall during a hike, causing damage to equipment or personal injury. You could be injured due to contact with a rock, log or tree, vehicle, or other natural or man-made object, or due to the acts of wild animals. You could also suffer injuries during the land transportation portions of the trip, whether in an O.R.E. vehicle or other conveyance.

— Exposure to natural elements including unfavorable weather conditions could result in hypothermia, dehydration, or sunburn.

— The remoteness of the river canyon could mean that prompt medical assistance is not available.

— Fatigue, chill, overheating and/or dizziness or other illness which may result in the participants diminished reaction time and increase the risk of accidents.

II. I am aware that whitewater boating entails risks of injury or death to myself. I understand that the description of these risks is not complete and that other unknown or unanticipated risks may result in injury or death. I agree to assume responsibility for the risks identified herein and other risks inherent to the activity of a river trip, except to the extent that such risks are due to the negligence of O.R.E.. My participation in this activity is purely voluntary and I elect to participate in spite of the risks.

III. I certify that I and any minor on whose behalf I am signing, are physically and mentally capable of participating in these activities. I certify that I have no medical or physical conditions which would interfere with my safety during this trip, or else I am willing to assume — and bear the costs of — all risks that may be created, directly or indirectly, by any such condition.

I hereby agree to follow all rules, regulations, and instructions of O.R.E. while on this trip. I also agree that O.R.E. may use film or photographic records of this trip for promotional and/or commercial purposes.

IV. I have carefully read, understood, and accepted the terms of this document and its legal ramifications. 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 document. I understand that this agreement shall be effective and binding upon myself, my heirs, assigns, personal representatives, and all members of my family, including any minors accompanying me. I understand that I am assuming all the risks inherent in whitewater rafting. After careful consideration, I voluntarily sign my name as evidence of my acceptance of the above provisions. If any portion of this agreement is found to be invalid, the remaining portions shall remain in full force and effect.

Name (please print)

Signature

Date

Parent or guardian name and signature (if above named participant is under the age of 18)

Date

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