



KAYAK + HIKE LTD.

POSTAL
2/F,
NO 86,
SHEUNG SZE WAN RD
CLEARWATER BAY
SAI KUNG,
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+852 9300 5197

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WEB
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BR #
30119760-000-01-09-0
C.I. #
665914

INDEMNITY RECORD + TRIP STATS

Please fill in and return therefore providing a name list for insurance purposes. Then print and have participants sign. This form can be given to Kayak and Hike Ltd on the day of your activity.

I, the undersigned, confirm that in respect of the outdoor (walking/climbing/abseiling/kayaking/boating/snorkeling/cycling/running/overnight accommodation/camping) activities ("Activities") that I have requested kayak and hike Ltd ("Company") to assist me in undertaking:-

The name, identity card or passport number and age shown below are true and correct and that my signature shown is the usual signature used by me for all purposes.

I am in good health and have not suffered from nor am I suffering from any illness, injury or other medical condition that might in anyway restrict or inhibit me from carrying on the Activities.

I am aware that the nature of the Activities may be hazardous and I also understand that the climatic conditions in Hong Kong may create additional dangers in participating in the Activities. As a consequence, I will at all times take all precautions to minimise any danger either to myself or others caused by these and other factors in undertaking the Activities.

I understand that it is imperative that, at all times, I shall follow the directions of the representatives of the Company in carrying on the Activities and that failure to do the same may cause danger to myself and/or other persons and/or Company equipment.

I accept that, in the event that the Company believes that I have not complied with any of the foregoing, the Company may, at any time, cease providing its services to me without being obliged to pay any refund. The Company will insist on payment of any damaged equipment used in the Activities at the current market prices.

I further agree that, in light of the hazardous nature of the Activities, I shall hold the Company, its directors, servants and agents (together "Indemnified") harmless in respect of any accident of whatever kind resulting in death or injury to myself or for any damage to or loss of or destruction to my personal property arising from the Activities save where the same shall arise from the gross negligence or willful default of any of the indemnified.

I further confirm that I shall indemnify the Indemnified in the event that my participation in the Activities shall lead to any claim brought against all or any of them by any third party.

In the event that I am under 18 years of age then the person signing below as my parent or guardian confirms the following:-

- (a) that they are one of the persons legally responsible for me.
- (b) that their name, shown below are correct and that the signature also shown below is their usual signature for all purposes.
- (c) that they agree that I shall undertake the Activities and shall assume all obligations on my behalf set out above.



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| PAX | NAME | NATIONALITY | E-MAIL+ CELL # | SIGNATURE |
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