

INDEMNITY BOND

(Please fill out in own handwriting and in BLOCK LETTERS)

I/We

Son/Daughter/Wife/Husband	d of	
to		
my own risk. I/We shall of Adventhrill and hereby absolute accident, damage or even of as the case may arise. I/A adventure I incur or suffer	onfirm all safety rules in force of the them from all liabilities in restleath caused or to be caused to the undertake and assure Advany loss or damage or any injurathem liable. I/We assure Adventing any heart ailment, high bloody impair my/our ability to safely going any medication, treatment any kind or any other intoxicants	Il for adventure activities entirely at and shall, at all times indemnify spect of any illness, personal injury, any persons or property, however, venthrill that if during any event, by to my body I shall not make any thrill and state that I/we do not have pressure, back ailment, epilepsy or participate in the said activity. I/We or consuming any sort of alcohol, a which may impair my/our ability to ticipate in the mentioned activities.
Date:	Place:	
Signature of Participant		_
Name:		
	FOR APPLICANTS BELO	
company or its staff wholly o	d to me in case of accident / injur	ry / fatality. I will not hold the haps, actions, claims, or demands
Signature of Parents/Guardia	an:	
Doto	Dloos	