

WAIVER

RELEASE OF ALL CLAIMS AND WAIVER OF LIABILITY WARNING!!!
READ CAREFULLY: BY SIGNING THIS YOU GIVE UP THE RIGHT TO SUE

To: Jorge Kozulj and any other member of Andescross staff, also are included all guides that belong to the AAGM (Asociacion Argentina de Guias de Montana)

DEFINITIONS: *Mountaineering* - includes backpacking, ski touring, telemarking, cross-country skiing, rock climbing, hiking, waterfall ice climbing, glacier travel and high altitude climbing and travel.

In consideration of Andescross accepting my application for any of his programs or activity.

**I AGREE TO THIS RELEASE OF CLAIMS AND WAIVER OF LIABILITY,
I assume the following risks and understand that mountaineering and skiing involves certain dangers, not all of which can be listed here.**

Among the more

1. Steep, rocky, screes and scrambling terrain where a fall, whether roped or unroped, may cause injury and death
2. Falling rock, ice and other objects which may cause injury or death
3. Violent and unpredictable weather, which may cause injury due to extremes of heat or cold, and which may prevent travel to, from or within an area
4. Unfamiliar country, where the climber, skier or traveler may become lost, get off route or be separated from the rest of the party
5. Wild animals which have been known to maul, sometimes fatally, mountain travelers
6. Avalanches which are highly dangerous and may be triggered by the activities of skiers or climbers or by natural forces
7. Remoteness of location with poor communications and inability to get rescue or medical assistance quickly or easily
8. Medical problems arising from climbing at high altitudes or in areas where adequate supplies of clean food or water may be unavailable
9. Transport by public or private motor vehicle, helicopter, and light fixed wing aircraft or through the use of animals.

I accept all of the risks and the possibility of death, personal injury doing any of the mentioned activities property damage and loss resulting from my involvement with the trip and/or course I am taking with Jorge Kozulj

I certify that I am physically capable and fit to participate in this activity and I have no medical conditions or needs other than those listed.

I confirm that I am eighteen years of age or older. (Younger participants must have a parent or guardian read and sign this document.)

I confirm that I have read over this agreement before signing, that I understand it, and that it will be binding not only on me but also on my heirs, my next of kin, my executors, administrators and assigns.

I agree that the laws of the Argentinian Republic govern this contract.

Signed this ___ day of _____, 20____,
at _____ (town/city), in the province/state of _____
(Applicant sign here) (Witness sign here)

(Print Name)

(Print Name)

