

**TOUR APPLICATION FORM
LIABILITY RELEASE FORM – PRO LOCO VICO EQUENSE**

TOUR DATE _____

FULL NAME: (Mr./Mrs./Ms./Dr.) _____

ADDRESS: _____

Town/City: _____ Prov./State: _____ Postal/Zip Code: _____

NATIONAL IDENTIFICATION NUMBER _____

TELEPHONE: _____

E-MAIL ADDRESS: _____

LIABILITY RELEASE FORM

I, the undersigned, fully understand that should any accident occur resulting in injury, death, or loss of property, I will in no way hold the guide responsible. I realize that any outdoor adventure has its inherent dangers and risks. This signed statement shall serve as release and assumption of risk for my heirs, executors, administrators and for all members of my family. As a parent or guardian, I also assume all responsibility and risk for dependents under my care.

Date (Day/Month/Year)

Participant Signature

Signature of Parent or Guardian (where applicable)

PHOTO AND RECORDING RELEASE

Pictures taken on trips could be published in books and films and appear in magazines and other publications. Pictures in which the participants appear may be used for conservation, promotion, advertising. If you agree, please sign and return this release. In any event your privacy will be respected.

I, the undersigned, hereby grant to the organizer all right to any photographs (motion or still) and recordings bearing my likeness, which may be taken of me. I further grant to the organizer the right to use such likenesses in any legitimate and ethical manner for any lawful purpose.

Date (Day/Month/Year)

Signed _____

Signed _____