



California Alpine Guides LLC.

Health Statement and Emergency Contact

We use the information on this form to help us be sure that you have signed up for an appropriate trip with respect to your experience and ability level; and to aid us should a problem arise. Please return this form with your acknowledgement of risks form to California Alpine Guides at the address below. **All information is confidential**

Trip Name and Date: _____ Date of Birth: _____

Name: _____
Last Middle First

Address: _____
Street Address City State Zip Country

Home Phone: _____ Work Phone: _____

Email: _____ Cell Phone: _____

Contact in the Event of an Emergency				
Name: _____	Relationship: _____			
Address _____	Street	City	State	Zip
Home Phone: _____	Work Phone: _____			

Please tell us about any medical problems or conditions you have. Please use the reverse side if needed:

Do you have any sensitivity to medications, antibiotics, insects (bee stings), or foods? YES/NO
If yes please list:

Do you have any of the following Health Problems or Conditions? YES/NO
(Please circle and explain) Altitude Sickness Asthma Chronic Back Problems Knee Epilepsy Migraine
Cold or Heat Intolerance Heart Problems/ Conditions High Blood Pressure Overweight Painful Menstruation Other

Explain:

Dietary Considerations (please circle): Everything OK No beef/ Chicken and Fish Ok Vegetarian (Cheese/Eggs Ok) Vegan Kosher Other (Explain):

Please explain any prescriptions you need to take while on the course and describe use. Please use the reverse side if needed:

Medical Insurance Company: _____ Policy # _____

To the best of my knowledge, I am in good health and understand the physical nature of the trip I am about to participate in:

Date: _____ Printed Name: _____ Signature: _____

Parent or Guardian Signature (if under 18 years of age) _____



Participant Agreement, Release, and Assumption of Risk

In consideration of the services of California Alpine Guides LLC, their agents, owners, officers, volunteers, participants and employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "CAG"), I hereby agree to release, indemnify, and discharge CAG, on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative, and estate as follows:

1. I acknowledge that my participation in outdoor adventure based activities such as rock climbing, mountaineering, hiking, camping, backpacking, cross-country and backcountry skiing entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

The risks include, among other things: the hazards of walking on uneven terrain and slips and falls; being struck by rock fall, ice fall or other objects dislodged or thrown from above; the use of climbing ropes and equipment; the forces of nature, including lightning, weather changes and avalanche; the risks of falling off the rock, mountain or into a crevasse; the risks of exposure to insect bites; the risk of altitude and cold including hypothermia, frostbite, acute mountain sickness, cerebral and pulmonary edema; my own physical condition, and the physical exertion associated with this activity.

Furthermore, CAG employees and independent contractors have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They might misjudge the weather or other environmental conditions. They may give incomplete warnings or instructions, and the equipment being used might malfunction.

2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.

3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless CAG from any and all climbs, demands, or causes of action, which are in any way connected with my participation in this activity or my use of CAG equipment or facilities, **including any such claims which allege negligent acts or omissions of CAG.**

4. Should CAG or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.

5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.

6. In the event that I file a lawsuit against CAG, I agree to do so solely in the state of California, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against CAG on the basis of any claim form which I have released them herein.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

Signature of Participant: _____ Print Name: _____

Address: _____

Phone: _____ Date: _____

PARENT'S OR GUARDIAN'S ADDITIONAL INDEMNIFICATION (Must be completed for participants under the age of 18)

In consideration of _____ (print minor's name) ("Minor") being permitted by CAG to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless CAG from any and all Claims which are brought by, or on behalf of Minor, and which are in any way connected with such use or participation by Minor.

Parent or Guardian: _____ Print Name: _____ Date: _____

Return all 3 pages promptly by fax or email to:

Fax: 1-877-686-2546

E-mail: Info@CaliforniaAlpineGuides.com (scanned .jpg's or .pdf's)



Cancellation & Refund Policy

Payments, Deposits, Refunds, Weather Credits, Gratuities, Transfer Fees

Domestic Trips:

A nonrefundable \$150.00 deposit is required with each reservation and the BALANCE is due 21 days prior to the course starting date. In the event you cancel your reservation 21 days before the course, the balance of your course fee is refunded. We are sorry, but NO REFUNDS will be made within 21 days prior to the course starting date.

Custom Trips/ Private Guiding:

A nonrefundable \$150.00 deposit is required with each reservation and the BALANCE is due 21 days prior to the course starting date. In the event you cancel your reservation, 21 days before the course start date, the balance of your course fee is refunded. We are sorry, but NO REFUNDS will be made within 21 days prior to the course starting date.

International Trips:

A nonrefundable \$500.00 deposit is required with each reservation and the BALANCE is due 60 days prior to the course starting date. In the event you cancel your reservation between 60-30 days before the course, a \$50.00 cancellation fee is required and the balance of your course fee is refunded. We are sorry, but NO REFUNDS will be made within 30 days prior to the course starting date.

Gratuities:

Tipping/Gratuities are customary on guided trips if you are pleased with the service provided by your guide or instructor and/or if the guide has gone beyond the scope of instruction to help you with the enjoyment of your course.

Transfer Fees:

You may transfer your domestic course fee (deposit and balance) to another scheduled course when we receive a \$50.00 non-refundable transfer fee with 21 days prior to your domestic course date. Transfers within 21 days prior to your domestic course is by discretion of CAG only. Policy does not apply to International trips.

Canceled Courses:

California Alpine Guides LLC. reserves the right to cancel, and/or reschedule courses due to inadequate minimum sign-ups, or other unforeseen circumstances. You will receive a full refund of course fee when the course is canceled 24 hours before the starting date. However, California Alpine Guides LLC. is not responsible for additional expenses incurred including non-refundable airline tickets, equipment, medical expenses etc. We recommend you obtain trip cancellation insurance to protect yourself. You can inquire about trip insurance by calling the CAG office at 1-877-686-2546

Weather Credits and Rescheduled Seminars:

California Alpine Guides LLC. reserves the right to reschedule courses due to severe weather conditions or other uncontrollable circumstances which make the course unsafe to continue. Weather Credit or Weather Partial Credit will be given for a course or seminar during or within 24 hrs of the course start dates, if severe weather conditions or other uncontrollable circumstances make the course unsafe to continue. This decision will be at the discretion of the trip leader and /or the Directors of California Alpine Guides.

***I have read, understand, and agree to California Alpine Guides LLC. Cancellation and Refund Policies as explained above.**

Please Sign _____

Return all 3 pages promptly by fax or email to:

Fax: 1-877-686-2546

E-mail: Info@CaliforniaAlpineGuides.com (scanned .jpg's or .pdf's)