Confirmation Number:



This Participation agreement must be signed (with no alterations) by each person rafting or participating in any REO activity. For any participant under 19 years of age the consent at the bottom of the agreement must be signed in advance by parent or legal guardian and presented to REO RAFTING ADVENTURE RESORT upon arrival. This form may be photocopied or additional forms are available by writing REO RAFTING, 845 Spence Way, Anmore, B.C., V3H 5H4 or by calling (604)461-7238 or faxing us at (604)461-4436 or through email at info@reorafting.com

Your signature on this form indicates you accept the conditions outlined below and understand the risk inherent in these activities. You also acknowledge that you have read this document at your leisure and have had adequate time to decide whether to participate in these activities. Rivers/Activities Day (e.g. Sat.) Time (conditions)	circle) PM PM PM PM PM
Your Reservation Name is:	
(i.e. the person who made your reservation) Daytrip Getaway Full Mo	
PLEASE PRINT NAME AND COMPLETE ADDRESS CLEARLY Mr. Mr. King Ms. King M	
Unit/Apt. # Address	
City Province or State Postal Code/Zip	
Cell Phone ()	
Home Phone() Other () Date of Birth (mm/dd/yy)/	
Have you taken a REO RAFTING ADVENTURE before? Yes □ No □ # of times Which river?	
LTD and its affiliates, Nahatlatch Rafting, Kayaking and Adventure Resort Ltd., and Ray Helme Cedar Products Ltd., (hereafter refe as "the Companies"), permitting me to participate in their rafting adventures, do hereby release and forever discharge the Companiagents, servants and employees successors and assigns, from all manner of actions, causes of action, suits, debts, contracts, claim demands whatsoever, which I now have, shall or may have for or by reason of any cause, matter or thing, including negligence on to the Companies, their agents, servants and employees. I agree not to make claim against any person or corporation who migh contribution indemnity against the Companies, their agents or employees. I AM AWARE of and understand the risks, hazards and dangers inherent in a rafting adventure, which include but are not to the possibility of personal injury, death, property damage or loss resulting therefrom, and travel to and from the location of the ope For purpose of this waiver, "rafting adventure" includes all of my activities on and off the river such as camping, and all other activities are apart of the rafting adventure may not be the safest, but has been chosen for its interest and challenge. Notwithstanding in risks, hazards, and dangers, I request the Companies to allow me to participate in their rafting adventure and related activities, and agree to assume all risks involved in engaging in such activities, including travel to and from the locations of operation. I AGREE, and am aware, that as a condition of being allowed to participate in a REO rafting adventure, that I may be required in a river or lake section and demonstrate proficiency in defensive and aggressive swimming and swimmer rescue. I also warrar am in good physical and mental health and that I have not consumed, nor will I consume, any alcoholic beverages or any substances, including prescription and non-prescription drugs, which would impair my senses, while participating in the rafting adventure of all my claims for damages o	es, the ns, and he part to claim limited eration. It is on imbing, chosen thereby uired to nt that I y other nture. se and ng this ats and
Participant Signature XDate	
PARENT/GUARDIAN AGREEMENT FOR MINORS (under the age of 19 years) I AM the parent/guardian of the minor who has signed this Agreement. The minor is over the age of eleven (11) years. I have re Agreement and understand that it is a full and final waiver and release from any claims for loss or damage that the minor may su certify that the minor is fully capable of participating in the rafting adventure and related activities of the Companies. I consent minor's participation in the activities of the Companies and approve all of the terms of the Agreement on the minor's behalf. I ag indemnify the Companies, their agents, servants and employees from any claims that might be made against them by or on behalf minor.	uffer. I to the gree to
Name (Print) Address Date	