

DEMENTED MITTEN TOURS

LIABILITY AND RESPONSIBILITY WAIVER

Date of Tour: _____

Name of Guest: _____

I hereby waive Demented Mitten Tours, its officers and employees from any liability of injury, loss or damage to personal property associated with activities included in this event. I understand that participation in this event and associated activities could include actions or tasks which might be dangerous or hazardous to me.

By signing below, I agree to the fact that participation can cause harm or injury to me. I release Demented Mitten Tours from all liability, costs and damages which could arise from my participation in this tour. I agree to accept financial responsibility for the costs related to any emergency treatment and give my confirmation of the same by signing this document.

I understand that we will be visiting historical sites and monuments on tonight's tour, and I will behave responsibly and respectfully at all times. I accept financial responsibility for any damage I may cause, either intentionally or unintentionally. I understand that any disruptive behavior on my part may result in my removal from the tour. In that case, I will be responsible for my own transportation back to my vehicle, and forfeit my ticket cost.

I acknowledge that I understand the content of this document. I am aware that it is legally binding and I sign it out of my own free will.

Signature of Participant: _____ Date: _____

FOR MINORS ONLY:

Name of Parent or Guardian: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____