Pics of Asia - Liability Waiver – REVISED – March 2018

**The small print!**

Please sign and return this liability waiver along with your booking form and the proof of payment for your 50% deposit. Participating in a Pics of Asia tour or workshop from means that you accept the terms of this liability waiver in their entirety.

**Assumption of risks**

By signing this liability waiver, I agree to indemnify and hold harmless Pics of Asia, their guides, staff and owners, in the even of any loss, injury or inconvenience I experience in connection with or during my participation in any of their workshops or tours, howsoever caused.

I understand that the activities, events or services provided, arranged and organised by Pics of Asia involve, amongst others, trekking, walking, using local transportation and reaching remote locations throughout Asia. Also, that consequently the activities involved in the tour or workshop may expose me to potential and / or unfamiliar risks, dangers and hazards.

I therefore understand that taking part in these activities may result in injury to myself or others and loss or damage to my property or that of others.

By participating in a tour or workshop with Pics of Asia I accept and fully assume all such risks, dangers and hazards (whether foreseen or unforeseen) and the possibility of injury or property loss or damage resulting therefrom.

**Medical conditions**

I understand that participating in a tour or workshop with Pics of Asia may involve physically demanding and / or strenuous activities. I understand that activities of this nature should only be undertaken by people who are fit, active and do not have any potentially problematic medical conditions.

By signing this liability waiver, I acknowledge that I am fully aware of this, and that to the best of my knowledge I am in good health and reasonably fit, and that there is no medical reason of which I am aware why I should not so participate.

**Confirmation of travel insurance**

I hereby confirm that I have taken out comprehensive travel insurance to cover myself, my health, my transport arrangements and my possessions for the entire duration of the contemplated Pics of Asia workshop or tour, and that the insurance policy details given below are true and correct.

**Liability waiver**

Please complete and return to info@picsofasia.com

Full Name\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nationality\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Passport No.\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical conditions / allergies\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current medication\*

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Travel Insurance Provider\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Policy No.\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Start date\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expiry date\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anything else we should be aware of?

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[ENDS].