

Snow Snake's Zip Line Tour Participate Requirements

Please review the following requirements:

- All Participants must sign the Voluntary Participation Waiver and Release Form
- Participants must be at least 8 years old
- Participants under the age of 18 must have a parent or legal guardian sign the Voluntary Participation Waiver and Release Form
- You must weigh at least 70 pounds, and not more than 275 pounds to participate
- Participants between the ages of 8 and 15 must be accompanied by an adult

Attire and preparation:

- Arrive 30 minutes prior to tour departure
- Closed toe shoes required; no flip flops or sandals
- Dress for the weather and no short shorts or skirts
- Please remove loose or dangling jewelry and body piercings
- Hair must be tied back
- Please remove all valuables including rings, necklaces, bracelets and personal electronics
- Cameras are welcome on the tour; however, you are solely responsible for the transporting

If you have any of the following medical conditions we **STRONGLY recommend you consult your physician prior to participation, and discuss any concerns with your guide:**

- Heart disease or any cardiac condition that may require immediate medical attention
- Hemophilia • Epilepsy • Asthma • Diabetes
- Taking any blood thinning medications
- Insulin dependent • If you have severe allergic reactions
- Severe recent, reoccurring or existing injuries

If you have ANY medical considerations list them below: (leaving the lines below blank indicates none)

You cannot participate in the Zip Line Tour if you are:

- Pregnant or think you may be pregnant.
- Under the influence of alcohol, illegal drugs, or legal drugs that impair you in any way.

Participation Waiver and Release Form

This form must be signed by all participants prior to going on the Snow Snake Mountain, Inc Zip Line Tour activity. If the participant is a minor, at least one parent or guardian must also sign as evidence of their agreement to these terms and conditions on their own behalf and on behalf of the minor. The person who is participating in the Snow Snake Mountain, Inc Zip Line Tour activity or any other event or program with Snow Snake Mountain, Inc shall be referred to hereinafter as "Participant". The "Undersigned" means only the Participant when the Participant is age 18 or older OR it means both the Participant and the Participant's parent or legal guardian when the Participant is under the age of 18. The Undersigned agree and understand that participating in a Zip Line Tour activity, walking, hiking, climbing on steps and slopes, zipping, traveling to and from the activity site (hereinafter referred to as the "Activity") can be HAZARDOUS AND INVOLVES THE RISK OF PHYSICAL INJURY AND/OR DEATH.

I, the undersigned participant, acknowledge that I have voluntarily applied to participate in the ACTIVITY operated by Snow Snake Mountain, Inc. Zip Line Tours, which is a physically demanding and hazardous activity. I do not have any medical condition which might create an unsafe risk to me or others who are participating in this activity with me. I have also read and understand the participant requirements.

Initial here _____

1. Acknowledgement of Risks:

I understand that the Activity may expose participants to certain risks which cannot be avoided. The activity requires moderate physical exertion and is conducted at varied heights. Among the hazards and risks of the activities and use of the premises and equipment include but not limited to the following: falls; collisions; abrupt and possibly harmful contact with structures or objects and persons; anxieties and fears associated with heights; close contact with other people; coordination and misjudgments on the part of participants or negligence of guides; the failure of structures or equipment; and the unpredictable forces of nature. Participants may experience increased heart rate and other symptoms of anxiety and stress due to physical exertion, reliance on other participants, a fear of height, or of unprotected falling, loss of balance, coordination and misjudgments, including failure to follow procedures and instructions, physical or mental or psychological stress, fatigue, chill and /or dizziness which may diminish reaction time and increase the risk of an accident. Injuries associated with participation may include breaks, sprains, bruises, and in extreme cases, emotional upset, anxiety and even death. Participants acknowledge that the description of risks is not complete and that other unknown or unanticipated risks may result in injury, illness or death. Participants acknowledge that this activity is purely voluntary. I, the undersigned, choose to participate with full knowledge of the inherent risks in such activity.

The Snow Snake Mountain, Inc Zip Line Tour activity is designed for participants in reasonably good health. Due to the nature of the tour, we reserve the right to refuse participation to anyone. The Snow Snake Mountain, Inc Zip Line Tour activity is operated in an isolated environment, immediate medical attention may not be available. We cannot be responsible for any valuables dropped from the tour or left in your vehicle. You must sign the Voluntary Participation Agreement Form below prior to participation.

Initial here _____

2. Assumption of Risks:

I understand that the ACTIVITY is hazardous. I am voluntarily participating in this ACTIVITY with knowledge of the dangers involved. I hereby accept any and all risks of injury or death to myself or any minor children or child of which I am a parent or legal guardian, arising out of or in any way connected with the use of the ACTIVITY, the Snow Snake Mountain, Inc and/or any of the affiliated organizations of Snow Snake Mountain, Inc.

Initial here _____

3. Release and Indemnity:

As consideration for being permitted to participate in the Activity, I hereby agree that I, my assignees, heirs, and/or as the parent/guardian of a minor participant, will release and hold harmless and not bring any claim or legal suit against Snow Snake Mountain, Inc Zip Line Tours, Snow Snake Mountain, Inc. its directors, managers, officers, agents, employees and volunteers or its affiliated organizations or the supplier of any of the equipment used in the activity ("Released Parties"), for any and all claims of injury, disability, death or other loss or damage to person or property suffered by me or my minor children or child arising in whole or in part from participation in this activity, both foreseeable or unforeseeable. In addition, I agree TO INDEMNIFY (that is, defend and satisfy by payment or reimbursement, including costs and attorney's fees) Released Parties from any claim of loss, injury or death, brought on by myself or my children or child against another co-participant. These agreements of release and indemnity include loss or damage caused or claimed in whole or in part by the negligence of a Released Party, but not intentional wrongs or the gross negligence of a Released Party.

Initial here _____

4. Severability

If any provision of this agreement is held to be void or otherwise unenforceable by a court of competent jurisdiction, the remaining provisions shall nevertheless be fully enforceable and unimpaired by such holding.

Initial here _____

5. Additional Provisions

I, an adult participant or the parent/guardian of a minor participant, authorizes Snow Snake Mountain, Inc Zip Line Tours to provide or obtain for me such medical care as it considers necessary and appropriate, and I agree to pay all costs associated with such care and transportation. Any dispute between a Released Party and participant or parent/guardian will be governed by the laws of the State of Michigan, and any mediation or suit shall take place only in that State in the County of Clare or in the Federal Court for the State of Michigan.

Initial here _____

6. I, on behalf of myself and any minor children or child, hereby give my permission and consent to the taking of photographs, video, or other media and agree that such material may be published and otherwise used by Snow Snake Mountain, Inc. Zip Line Tours for purposes it deems appropriate without compensation to myself or the child.

Initial here _____

7. I the Undersigned understand and acknowledge that this Agreement is a contract and shall be binding to the fullest extent permitted by law. If any part of this Agreement is deemed to be unenforceable, the remaining terms shall be an enforceable contract between the parties. It is the Undersigned's intent that this Agreement shall be binding upon the assignees, subrogates, distributors, heirs, next of kin, executors and personal representatives of the Undersigned.

Initial here _____

8. I HAVE CAREFULLY READ AND FULLY UNDERSTAND THE PROVISIONS OF THIS AGREEMENT INCLUDING MY WAIVER OF CLAIMS AGAINST SNOW SNAKE MOUNTAIN, INC. ZIP LINE TOURS. I HAVE NOT RELIED UPON ANY OTHER REPRESENTATION OR STATEMENT, WRITTEN OR ORAL.

PLEASE PRINT. Leave no lines blank. List each Participant's information individually and sign.

Participant's Name: _____ Birthdate: _____ Height: _____ Weight: _____ lbs.
Address: _____ City: _____ State: _____ Zip: _____
Cell Phone: _____ Email: _____
Participant's Signature: _____ Date: _____
Parent/Guardian Signature: _____ Relation: _____ Date: _____
Emergency Contact: _____ Phone: _____ Relation: _____

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