



PARTICIPANT'S ASSUMPTION OF RISK

WARNING: There are significant elements of risk in any activity, training or use of any equipment associated with trekking, hiking, mountaineering, rock climbing, rock face climbing, ice climbing, ski mountaineering and walking on glaciated terrain (the "activities"). We do not want to frighten you or reduce your enthusiasm, but we do think it is important for you to be informed about risks inherent in the activities.

In consideration of the services of Pinnacle Outdoor Adventures, and its officers, agents and employees and all other associated persons or entities (the "Concessionaire"), I understand and agree that:

Although the Concessionaire will take reasonable steps to provide appropriate equipment and capable guides, I may not be skilled in one or more activities and I know these activities are not without risk. I understand that certain risks cannot be eliminated without destroying the unique character of the activities. The same elements that contribute to the enjoyment of the activities can cause loss or damage to equipment, accidental injury, illness, and, in extreme cases, permanent trauma and even death. The following describes some, but not all, of the inherent risks of the activities:

1. Falls;
2. Crossing, climbing, or climbing down rock, snow, and ice; and steep or uneven terrain;
3. Travel and river crossings, including travel to or from the activities;
4. Traveling in glaciated terrain, including; crevasse falls, crossing crevasses, and snow bridges;
5. Being struck by rock fall, icefall, or other objects dislodged, dropped or thrown from above;
6. Altitude related sicknesses and conditions including, but not limited, to acute mountain sickness, pulmonary edema, cerebral edema, and retinal hemorrhage;
7. Cold weather related injuries including hypothermia and frostbite that may result in loss of limbs, digits, and permanent scarring;
8. Heat related illnesses, including heat exhaustion and heat stroke;
9. My own capabilities may contribute to the risk, including my sense of balance, physical coordination, and ability to follow instructions, and the actions of other climbers;
10. If I experience fatigue, chills or dizziness during the activities, my reaction time will be diminished and the risk of accident will increase;
11. Equipment failure, or injury from equipment;
12. An "act of God" including things like avalanche, icefall, rock fall, inclement weather, high winds, and severe cold;
13. Accidents or illnesses occurring in remote places without available medical facilities.

I know these activities entail risk of injury or death. I understand this description of inherent risks is not complete and that other risks, anticipated and unanticipated, also can result in injury, illness or death. I accept full responsibility for all the risks of these activities, whether or not listed in this agreement. My participation in these activities is purely voluntary. I choose to participate in spite of and with full knowledge of the risks.

I possess at least the following qualifications, which I understand are prerequisites to my participation in these activities:

- a. I am physically and mentally capable of participating in the activities, including using the equipment.
- b. I am safety conscious and acknowledge that wearing an UIAA Approved helmet may be a basic safety precaution with respect to preventing head injury.

I certify, by signature below, that I am fully capable of participating in the activities. I also certify that I accept the risk of any medical or physical condition I may have.

I assume full responsibility for myself, including any minor children for whom I am responsible, for bodily injury, accidents, illness, death, loss of personal property, and any related expenses, resulting from the risks and dangers of the activities and my/our negligence while participating in the activities.

I have read and accept the foregoing terms and conditions. This Assumption of Risk is binding upon myself, my heirs, my personal representatives and administrators, and all members of my family including any minors accompanying me in any of the activities.

We require a written signature. Electronic signatures are not accepted. Kindly send the signed scanned copy to support@pinnacleoutdooradventures.com or submit it in person.

***Participant's Full Name [Please Print]** _____

***Participant's Signature** _____ **Date** _____

A parent or legal guardian must sign below for any Participant that is under 18 years of age. On behalf of any minor participant the parent or legal guardian understands and accepts all the terms of the Assumption of Risk.

Parent/Guardian's Full Name: [Please Print] _____

Parent/Guardian Signature _____ **Date** _____