

Transformational Tours to MACHU PICCHU – LIABILITY WAIVER

Each traveller must sign and return this waiver with signed Terms and Conditions and Questionnaire to
SERENITY TRANSFORMATIONAL TOURS 225 Serenity Lane, Galiano Is. 42-14B.C. Canada V0N1P0

I (print name), _____, HEREBY ACKNOWLEDGE that I have voluntarily applied to participate in the tour I have chosen with Serenity Transformational Tours as indicated in the Application Form I have signed. I am aware that during my participation in a tour of this sort certain risks and dangers may arise, including, but not limited to: the hazards of travelling in mountainous terrain, high altitudes, or undeveloped areas; travel by train, plane, automobile, horseback, or by other means of conveyance, or on foot; roads, trails, hotels, vehicle, or other means of conveyance which are not operated nor maintained to standards common in Canada or the United States; the forces of nature; civil unrest; terrorism; accident or illness without access to means of evacuation or availability of medical supplies; physical exertion for which I am unprepared; consumption of alcoholic beverages; negligence (but not wilful or fraudulent conduct) by Serenity Transformational Tours, its principals, guides, agents or others; or factors known or unknown.

I am also aware that medical services or facilities may not be readily available or accessible during some or all of the time that I am participating in the trip and that it is my responsibility to have full medical evacuation insurance coverage for the duration of this trip. I agree that Serenity Transformational Tours, its principals, guides and agents are not liable for the adequacy or availability any equipment or supplies that may be provided in conjunction with the Enter the Mystery tour, or for the adequacy or availability of any first aid or medical care, or the negligent provision of first aid or medical care by it or by its guides or agents, participants, or by any physician, emergency care facility or any other person.

I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGERS, DELAYS, LOGISTICAL AND OTHER PROBLEMS IN CONNECTION WITH THE TRIP THAT MAY BE INVOLVED AND HEREBY AGREE TO BE RESPONSIBLE FOR MY OWN WELFARE AND ASSUME ANY AND ALL RISKS OF ILLNESS, INJURY, EMOTIONAL TRAUMA, AND DEATH AND HEREBY RELEASE AND DISCHARGE SERENITY TRANSFORMATIONAL TOURS AND ITS AGENTS OR ASSOCIATES FROM ALL ACTIONS, CLAIMS, OR DEMANDS FOR DAMAGES RESULTING FROM MY PARTICIPATION IN THE TRIP.

I agree that under no circumstances, including negligence, shall liability to the applicant, his/her heirs, executors and administrators and all members of his/her family, of Serenity Transformational Tours, its principals, guides or agents exceed the total amount of funds paid by the applicant under the contract. The exclusions and limitations on the liability of Serenity Transformational Tours, its principals, guides and agents as set out in this Liability Waiver and in the Conditions of Travel herein, are effective, and apply to claims in contract or in tort, including negligence, and whether or not there is a fundamental breach of the contract.

I agree that the foregoing obligation shall be binding upon me personally, as well as upon my heirs, executors and administrators, and all members of my family, including any minors accompanying me.

I HAVE READ CAREFULLY THIS LIABILITY WAIVER AND IN PARTICULAR THE CONDITIONS OF TRAVEL AND THE APPLICATION FORM PERTAINING TO TRANSFORMATIONAL TOURS TO MACHU PICCHU, WHICH ARE ALSO POSTED ON THE INTERNET AT A www.transformationaltours.com, AND FULLY UNDERSTAND AND AGREE WITH THEIR CONTENTS. I AM AWARE THAT THEY CONTAIN RELEASES, EXEMPTIONS AND LIMITATIONS OF LIABILITY, AND ARE PART OF THE CONTRACT BETWEEN MYSELF AND SERENITY TRANSFORMATIONAL TOURS, AND I SIGN IT OF MY OWN FREE WILL.

Signature of Applicant: _____

(Print Name) _____

Date: _____

(Parent or Legal Guardian must sign for persons under the age of 19.)



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