Magic Falls Rafting Company
And
Magic Rivers Rafting Company

Dave and Donna Neddeau, Owners
P.O. Box 9, West Forks, ME 04985
1-800-207-7238
Email: adventures@magicfalls.com

REGISTRATION FROM

PLEASE PRINT

Name_____**Date of Birth**_____**Sex**_____

Address_____**Home Phone**_____

City_____**State**_____**Zip**_____**Work Phone**_____

Email Adddress_____

Person to contact in case of emergency_____**Phone**_____
Do you have any medical conditions we should be aware of ? Yes_____ **No**_____

If yes, explain_____
Are you taking any prescribed medication? Yes_____**NO**_____

If yes, please list:_____

Family Physician_____**Phone**_____

Read Carefully
Waiver and release of liability

In consideration of **Magic Falls Rafting Company, Magic Rivers Rafting Company, and New England Outdoor Center,** (herein after **Magic Falls/Magic Rivers/ NEOC**) , furnishing services and/or equipment to enable me to participate in **whitewater rafting, rock climbing, kayaking, inflatable kayaking, hiking, overnight camping trips, etc.** I agree as follows:

I fully understand and acknowledge that outdoor recreational activities have: (1) inherent risks, dangers and hazards and such exists in my use of **Magic Falls/Magic Rivers/NEOC** recreational equipment and my participation in **whitewater rafting, rock climbing, kayaking, inflatable kayaking, hiking, overnight camping trips, etc.** activities; (b) my participation in such activities and/or use of such equipment may result in injury or illness including, but not limited to bodily injury, disease, strains, fractures, partial and/or total paralysis, death or other ailments that could cause serious disability; © these risk and dangers may be caused by the negligence of the owners, employees, officers or agents of **Magic Falls/Magic Rivers/NEOC :** the negligence of the participants, the negligence of others, accidents, breaches of contract, the forces of nature or other cause. Risks and dangers may arise from foreseeable or unforeseeable causes including, but not limited to, guide decision making, including that a guide may misjudge terrain, weather, trail or river route location, and water level, risks of falling out of or drowning while in a raft, canoe or kayak and such other risks, hazards and dangers that are integral to recreational activities that take place in a wilderness, outdoor or recreational environment; and (d) by my participation in these activities and/or use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the owners, agents, officers, or employees of **Magic Falls/ Magic Rivers/NEOC ,** or by any other person.

I, on behalf of myself, my personal representatives and my heirs hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify **Magic Falls/Magic Rivers/NEOC** and its owners, agents, officers, and employees from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my use of Magic Falls recreational equipment or my participation in **whitewater rafting, rock climbing, kayaking, inflatable kayaking, hiking, overnight camping trips, etc.,** activities. I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by the owners, agents, officers or employees of **Magic Falls/Magic Rivers/NEOC.**

The Venue of any dispute that may arise out of this agreement or otherwise between the parties to which **Magic Falls/Magic Rivers/NEOC** or its agents is a party shall be Somerset County Maine.

I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT AGREE, IT IS MY INTENTION TO EXEMPT AND RELIEVE MAGIC FALLS/MAGIC RIVERS/NEOC FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE

_____ _____ _____
SIGNATURE **AGE** **DATE**

SIGNATURE OF PARENT OR GUARDIAN (If under the age of 18)_____