



**Xeni Gwet'in First Nations Government**  
**General Delivery**  
**Nemiah Valley, BC, Canada V0L 1K0**  
**Tel: (250) 394-7023**  
**Fax: (250) 394-7043**

**XENI GWET'IN FIRST NATIONS GOVERNMENT – WAIVER**

PLEASE READ AND CONSIDER CAREFULLY BEFORE SIGNING.  
THIS IS A LEGAL DOCUMENT

**Xeni Gwet'in First Nations Government is not responsible for any loss or damage, personal injury, illness or death suffered by any person, either traveling to the location of an activity or tour, before, during or after the activity or tour, for any reason whatsoever including negligence on the part of the company, its agents, officers, employees, or contractors.**

I, \_\_\_\_\_ hereby acknowledge and agree that wilderness  
(print name)

activities pose certain risks and hazards, including but not restricted to: loss or damage to personal property, hypothermia and inclement weather, slipping and falling, falls from horseback, falling objects, avalanches, wildlife encounters, injuries from horses, travel by land, air or water, or suffering any type of accident or illness in remote areas without easy access to medical facilities.

I acknowledge that Xenigwet'in First Nations Government is not responsible for any evacuation costs incurred on my behalf, and I accept full responsibility to such costs.

I fully understand that by signing this agreement, I or my heirs, executors and administrators will be forever prevented from suing or otherwise claiming against Xenigwet'in First Nations Government, its agents, officers, band members, employees, or contractors for any loss or damage, personal injury, illness or death which may be sustained while participating in or preparing for any activity or tour, whether or not such loss or damage, personal injury, illness or death is caused solely or in part by the negligence of Xenigwet'in First Nations Government, its agents, officers, employees, or contractors. I further agree to indemnify the company for any legal fees incurred in such claim.

I certify that I am medically and physically fit to participate in the tours or activities carried out by the Xenigwet'in First Nations Government, and that I do not have any medical conditions including but not limited to back or neck problems, heart conditions, osteoporosis or pregnancy that would be aggravated or worsened by my participation in the tours or activities carried out by the Xenigwet'in First Nations Government.

I have carefully read this assumption of risk agreement and indemnifying release, and fully understand its content. I have been given the opportunity and have been encouraged to seek legal counsel prior to signing this agreement.

I hereby acknowledge that this agreement is a binding contract between Xenigwet'in First Nations Government and myself, and sign it freely and voluntarily. I am of sufficient age and mental capacity to do so.

Dated: \_\_\_\_\_

Signature of participant: \_\_\_\_\_

Signature of parent or guardian (if participant under age of 18) \_\_\_\_\_

Dated: \_\_\_\_\_

Signature of witness: \_\_\_\_\_