# **Shuttle N Shred Liability Waiver & Release**

Full Name:		
Phone Number:		
Email Address:		
Date of Birth:		

#### **Activities Covered**

**Participant Information** 

Mountain biking, skiing, snowboarding, paddle boarding, kayaking, hiking, shuttle transportation, and related recreational services.

### **Assumption of Risk**

I understand these activities involve risks including terrain hazards, collisions, falls, extreme weather, equipment failure, mechanical or vehicular issues, road hazards, avalanche risk, elevation-related illnesses, and actions of other participants or third parties. I voluntarily assume all risks - known and unknown -associated with my participation.

## Waiver and Release of Liability

I release, waive, and discharge Shuttle N Shred, LLC and its affiliates from any and all liability for injury, death, property damage, or loss arising from my participation, even if caused by negligence.

#### Damage to Equipment and Property

I accept responsibility for damage to my gear or any I may cause to Shuttle N Shred vehicles or property.

I agree to reimburse costs for intentional or negligent damage.

#### Alcohol and Substance Use

Alcohol may be permitted only for participants 21+. Impaired behavior or intoxication increases risks. I assume responsibility for my actions related to alcohol/substance use.

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### **Helmet and Safety Gear**

I agree to wear a helmet while mountain biking and understand the importance of safety gear. Participation without it is at my own risk. It is recommended to wear applicable safety gear based on the excursion and Shuttle N Shred LLC will recommend the proper safety equipment for each excursion.

## **Medical Emergency Authorization**

I am in good health and authorize emergency medical care if needed, accepting all associated costs.

#### **Media Release**

[] I grant permission for Shuttle N Shred to use photos/video of me.
[] I do not grant permission.

## **Governing Law and Venue**

This agreement is governed by the laws of Arizona. Legal matters will be handled in Maricopa County, AZ.

## **Digital Signature and Agreement**

By signing below, I acknowledge I've read and agree to the waiver terms. My electronic signature is legally binding.

## **Signature**

Participant Name:
Date:
] I agree to upload & sign electronically. at
nttps://shuttlenshred.com/waiver

If under 18:

Parent/Guardian Name:

Parent/Guardian Signature:

Date: