

Belle France Tours

Release & Indemnity

(This Document affects your legal rights; please read carefully before signing.)

I am aware that any form of travel contains some inherent risks of illness, injury or death, which may be caused by the negligence of others, the characteristics of the lodging and its surroundings, physical exertion for which I am not prepared, forces of nature, or other agents known or unknown. I am participating in such travel of my own volition, and am aware of the inherent risk of such travel. I am also aware that medical facilities may not be readily available or accessible during some of the time that I am participating in a **Belle France Tour**. I also acknowledge that I have received no information from **Belle France Tours**, its directors, officers, employees, agents or representatives (hereafter collectively referred to as **Belle France Tours or BFT**) that in any way minimizes the risks of such travel. Therefore, in consideration of arrangements made by **Belle France Tours** for travel by me, and its providing of tour services or as agent, I agree to:

1. ASSUME AND ACCEPT ALL RISKS, DANGER AND HAZARDS, including without limitation, illness, injury, death, loss or damage to my person or property, in any way connected with travel arranged by **BFT** for me.
2. WAIVE ANY AND ALL CLAIMS that I may have against **BFT** in respect to such travel.
3. RELEASE AND DISCHARGE **BFT** from any and all liabilities for any loss, damage, injury or expense that I, or my next of kin or personal representatives, may suffer or incur as a result of my participation in travel arranged by **BFT**, including negligence on the part of **BFT**.
4. INDEMNIFY AND HOLD HARMLESS **BFT** from any and all liabilities for property damage, personal injury or death suffered by me or a third party as result of my participation in travel arranged by **BFT**.

I further agree that this release and indemnity shall be binding upon me, my heirs, my next of kin, personal representatives, and any minor accompanying me. I agree that this release and indemnity, and all rights and liabilities referred to herein, shall be interpreted in accordance with and governed by laws of Washington State, and any action arising therefrom shall be within the exclusive jurisdiction of Washington State Courts.

I have carefully read this release and indemnity, and fully understand its contents. I am aware that this document affects my legal rights and liabilities, and those of my heirs, next of kin, and personal representatives.

I sign this release and indemnity of my own free will after having a reasonable opportunity to review it.

SIGNED this ____ day of _____.

Signature _____

Print name _____