

Please read the following Agreement carefully. A parent/guardian must sign the agreement for minors (under 18 years of age).

In this covenant, I, hereby acknowledge and agree for myself, my family, heirs, and assigns as follows:

1. I will follow the organizer's instructions at all times during the time period of the said activity and I will not deviate from the planned route. I will not Litter, Smoke or Drink Alcohol. I will pay all shared expenses and dues and any other additional expense that may come up during the course of the said activity.
2. I understand that rules and regulations have been adopted for the safe enjoyment of the activity and I agree to adhere to those regulations and all other rules as displayed on the website www.techalps.in and/or mentioned by the trek leader/organiser.
3. Participation in Adventure related activities such as travelling in public transport, trekking, hiking, climbing, scrambling, rope climbing, and camping can result in injuries or accidents. Exposure to natural elements like the sun, wind, rain, cold regions, high altitudes, difficult terrains can likely result in sunburn, dehydration, heat exhaustion, heat stroke, heat cramps, Altitude sickness, Fatigue, and Exhaustion. Any such events can be uncomfortable or harmful and may even cause injury. Further, I understand that there can be dangers of civil disturbances or risks of travelling in remote places without access to medical facilities.
4. I understand that being outdoors exposed to all sorts of environmental factors, a certain level of unpredictability, uncertainty, and discomfort can be associated with any type of adventure activity. Under such circumstances, certain things may not go as planned. For instance, there may occur delays in starting a planned journey or delays reaching the intended destination. Food can be cooked outdoors and may not turn out to be delicious. Accommodations can be outdoors and may not be comfortable or luxurious. Sometimes due to unavoidable situations, I might have to share accommodations with another individual.
5. I acknowledge and I am fully aware of the inherent risks associated with participation in the said Trip/Activity that I have registered for. Additionally, to the maximum extent allowed by law, I Waive, Release, and Discharge TechAlps Private Limited, Its Organizers, Members, and Associates from any negligence, claims, losses, or causes of action including, but not limited to death, personal injury or property damage arising out of my own voluntary participation in the above-mentioned activity/trip.
6. I understand that the said activity I am participating in is an amateur outdoor activity organized by TechAlps which is meant for recreational purpose only. I understand and agree that the Organizers have simply facilitated the gathering of members interested in the said Trip/Activity. I am voluntarily participating and I give consent as well as hold responsibility for my own risk and peril involved in this Trip/Activity.
7. I affirm that I am in good physical health and have carefully read the difficulty rating. I am confident of my ability to take part in the said activity. I have no significant Injury, medical ailments or conditions that would counter-indicate any disability to take part in the outdoor activity.
8. I hereby give permission for TechAlps Private Limited and its Organizers to secure medical treatment for me in the event of an emergency. I authorize the physician or medical personnel or Certified First Aider present to provide treatment deemed necessary by them. I confirm that I am 18 years of age or older and under no legal constraint or impediments and I acknowledge that by signing this agreement, I or the minor/ward on whose behalf I sign for will be bound to its terms. My signature below indicates that I have had sufficient opportunity to read this entire document, that I have read it, and that I understand how it affects my or the minor/ward's legal rights. I agree to be bound by its terms. If a provision of this Agreement is or becomes invalid or unenforceable in any jurisdiction that shall not affect the validity or enforceability of any other provision of this Agreement.

Full Name: _____ S/O D/O: _____

Age: _____ Phone Number: _____ Emergency Name & Contact: _____

Address: _____ Blood Group: _____

Date: _____ Place: _____ Signature: _____