

**CZECH ACTIVE TOURS, LLC
REGISTRATION FORM – 2011**



Please print the three-page Registration Form/Waiver, fill-out completely and sign by each participant. Mail the original to us and keep a copy for your records.

IMPORTANT NOTE:

Before completing the registration and waiver, please read all material listed on our webpage: <http://www.czechactivetours.com>

Let us know **BEFORE YOU REGISTER** if anything is unclear or if you have any questions!

PLEASE COMPLETE ALL FIELDS AND PRINT CLEARLY

1) Complete Name (as it appears in your passport - PLEASE PRINT):

2) Street Address:

3) Suburb: _____ State: _____ Postal Code: _____

4) Age: Date of Birth: ___/___/___ Sex: Male Female

5) Occupation:

6) Phone # (Home): _____ (Cell phone # on trip): _____

7) E-Mail Address (All communications are sent via e-mail!):

8) Roommate on trip: _____ Please find me one if possible:

9) PASSPORT INFO: Number: _____ Country: _____

Date of Issue: ___/___/___ Date of Expiration: ___/___/___

State Where Issued: _____

10) EMERGENCY CONTACT (not on trip) - NAME:

Phone #: _____ Relationship to participant: _____

11) Please note SPECIAL NEEDS OR HISTORY (e.g., medical, physical or dietary) of which we should be aware. If none, please indicate with "N/A".

12) Our group dinners feature either buffet, entrée choice or fixed menu. So that our food providers can better plan our menus, we ask that you number your food choices below in order of preference. Even though we try our utmost to be accommodating, this does not mean a guarantee of your choice! FISH ___ MEAT (may be pork) ___ CHICKEN ___ VEGETARIAN ___

13) BICYCLING EXPERIENCE:

a) How often do you cycle? What is your typical ride length, your pace, and on what terrain?

b) Tell us about your touring experience within the past 3 years:

c) Are you familiar with basic bicycle maintenance, like changing a flat tire?

d) How will you train to successfully complete this tour?

14) How did you find out about this tour?

15) What is your T-shirt size?

PAYMENT POLICIES AND TRAVEL INSURANCE



Participant Name:

Tour Name:

Tour Date:

Tour Price:

PAYMENT POLICIES:

A \$400 deposit per person is required with each registration. A second instalment of the trip payment of \$400 is due at least 120 days prior to the trip start date. The final balance is due at least 75 days prior to the trip start date. If you do not make the appropriate payments, it will be considered a cancellation.

We send payment-due reminders via e-mail, however it is the participant's responsibility to make timely payments. Please include your e-mail address with this registration and keep us informed of changes to your e-mail as well as other personal information.

CANCELLATION POLICIES:

All tour cancellations must be in writing and the date of cancellation will be the date of receipt of the written communication. We are happy to look for replacements if cancellation of your booking becomes necessary. At no time, however, can we guarantee that we will be able to fill a cancelled spot.

Cancellations received at least 121 days prior to the trip start date: all payments will be refunded less a \$90 administrative fee per person.

Cancellations received 120-76 days from the trip start date: the deposit is non-refundable unless we can fill your spot. If we can fill your spot, we will refund all payments made less a \$90 administrative fee per person.

Cancellations received 75-60 days from the trip start date: fifty percent of the total trip price per person is non-refundable unless we can fill your spot. If we are able to fill your spot, we will refund all payments made less a \$90 administrative fee per person.

Cancellations received less than 60 days from the trip start date: No refunds are possible unless we can fill your spot. If we are able to fill your spot, we will refund all payments made less a \$130 administrative fee per person.

In the unlikely event that Czech Active Tours should cancel a tour, you will be notified at least 60 days from the scheduled trip start date and all trip fee payments will be refunded in full. Refunds constitute full settlement in the event of cancellation of a tour; Czech Active Tours is not responsible for airfare, fees or other expenses incurred due to change in itinerary or tour cancellation. No refund or discount will be granted for arriving late or leaving a tour prior to its conclusion.

TRAVEL INSURANCE:

Unexpected things can happen and your travel investment should be protected. We strongly advise you purchase Travel Insurance to safeguard you in the event of unforeseeable trip related expenses such as, but not limited to, trip cancellation, flight interruption and delay, injuries, emergency medical treatment, and lost or stolen luggage.

Czech Active Tours does not recommend any particular policy and you should inquire carefully about coverage and conditions.

FORM OF PAYMENT:

We accept payment by check, money order, bank transfer, or credit card (VISA or Master Card). In order to keep prices low we charge an additional surcharge of 3% of the total price when you pay by credit card.

Please make checks payable to "LUDVIK GREC" and send the original Registration/Waiver document to: Ludvik Grec - Czech Active Tours, LLC, 1 Chestnut Place, South Lake, WA 6164

Bank information for payments by bank transfer:

- Bank Name: The University Credit Society Limited ABN 90 087 651 901, 80 Broadway, Nedlands WA, 6164
- BSB Number: 806036
- Account Name: Ludvik Grec
- Account Number: 36451

WEBSITE: www.czechactivetours.com

E-MAIL: info@czechactivetours.com

A Confirmation and Welcome Letter with pre-trip details are sent via e-mail upon receipt of Registration.

WAIVER AND RELEASE OF LIABILITY AND ASSUMPTION OF ALL RISKS



IN CONSIDERATION for allowing my participation in a Czech Active Tours tour, I hereby waive, release and discharge forever, Czech Active Tours, LLC, its officers, directors, agents, employees, trip leaders and volunteers (collectively "Czech Active Tours") from and against any and all liability including, but not limited to: any injury, death, illness, and property damage or loss occurring while participating in a Czech Active Tours tour or in travel to and from the tour. I also agree not to sue or file claims of whatever nature against Czech Active Tours for any or all damages, personal property losses, and injuries or claims which I may sustain as the result of the negligence or other acts, however caused, by myself or Czech Active Tours during my participation in Czech Active Tours tours and/or activities. I understand and agree that this Waiver and Release shall be binding upon me personally, all members of my family, my and their heirs, successors, assigns, and legal and personal representatives.

ASSUMPTION OF RISK AND PARTICIPANT/ CYCLIST RESPONSIBILITIES

- 1) I realize that bicycling is a potentially hazardous activity and that the tour routes require bicycling on public roadways- paved and unpaved of varying condition, and trails-public and secluded- of varying conditions, and in bad weather, and that cyclists have been hospitalized or died because of mishaps-traffic or other- that are either their responsibility or others' responsibility.
- 2) I am voluntarily participating in this tour with the knowledge of the numerous risks and dangers involved including but not limited to: negligence in any manner on the part of Czech Active Tours, including, without limitation, negligence in the conduct or arrangement of the trip in any respect from inception to completion; collision with pedestrians, vehicles, other cyclists, and /or fixed or moving objects; the negligence of other cyclists and/or Czech Active Tours ride leaders, volunteers or drivers; dangers arising from falls; poor road and trail surfaces; dangers from road irregularities including but not limited to potholes, road grooves, railroad crossings, and slippery metal and wooden bridges; hazardous traffic patterns; exposure to risks while engaged in other voluntary activities related to the tour including but not limited to swimming, kayaking, and walking to various destinations; breakdown or failure of bicycles-owned or rented- or other equipment; negligence in the maintenance and operation of any van or other motor vehicle used to transport passengers; transportation failures whether by train, auto, van or bus, boat, by foot or any other conveyance; hazards of consumption of alcoholic beverages; risks associated with consuming food or water; criminal activity; dangers associated with animals; risk of accident or illness without access to rapid emergency medical services and supplies; the adequacy of medical attention once provided; and risk of stolen, lost or misplaced luggage or property-including bicycle. I hereby agree to be responsible for my own welfare and accept any and all risks of delay, unanticipated events, inconvenience, illness, injury, emotional trauma or death.
- 3) While Czech Active Tours may provide me with geographical directions during bicycle rides, they do not make, and expressly disclaim any representations or warranties with respect to the condition or safety of the roads/trails on which I bicycle or walk, and I am responsible for observing such road or trail conditions and determining whether I am able to ride my bicycle and/or walk in light of such conditions.
- 4) I agree that I will use good judgment, be self-reliant and discontinue further participation in the bike tour if at any time I believe conditions to be unsafe. In extreme situations, I understand and agree not to wait for assistance exclusive to the support provided by Czech Active Tours. In the event of any injury or accident, I agree to notify the event leader, and consent to and permit emergency medical treatment.
- 5) I realize that touring requires physical conditioning, and attest that I am physically fit and have sufficiently trained for the completion of the Czech Active Tours tour entered, or will be subject to early termination at Czech Active Tours' discretion if I am unable to cycle at the standard of the tour.
- 6) I agree to wear an ANSI or Snell approved helmet at all times when riding a bicycle during the tour.
- 7) I agree to provide for my own insurance coverage (travel, emergency medical, health, accident, theft, etc.) while participating in a Czech Active Tours Tour, and for ensuring that such insurance covers my activities for the duration of the registered tour, and that it is valid in the countries where the tour is conducted.
- 8) I understand Czech Active Tours reserves the right to remove any person it judges as unwilling to ride in a safe manner or who it determines to detract from the enjoyment of the trip by others.
- 9) Czech Active Tours reserves the right to make route, lodging and trip modifications or cancel events. I further understand that I will not be reimbursed for airline fees or other expenses incurred due to trip modifications, changes in itinerary or event cancellation.
- 10) I give permission to Czech Active Tours to use my name, photographs, evaluations or any other record of my participation in Czech Active Tours tours for any promotional purposes, without fee, obligation or liability to me.
- 11) I agree not to use any of Czech Active Tours' cycling routes, cue sheets or other trip materials for purposes of organizing any tour or event.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND THE CONTENTS AND LEGAL RAMIFICATIONS OF THIS WAIVER AND RELEASE AGREEMENT, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE. I AGREE THAT THIS IS A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT. THIS AGREEMENT MAY NOT BE MODIFIED ORALLY AND MAY NOT BE WAIVED IN ANY RESPECT.

TRIP INFORMATION, PAYMENT AND CANCELLATION POLICIES

I have read and agree with all payment and cancellation policies as well as information included on Travel Insurance described in the "Payment Policies and Travel Insurance" page 3 of the 2011 Czech Active Tours, LLC Registration Form. If no signature of guardian appears below, registrant is deemed to be at least 18 years of age.

SIGNATURE:

TOUR NAME:

PRINTED NAME:

TODAY'S DATE: