

SORCERER LODGE
Iconoclast Developments, Ltd.

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Dear Guest,

Following, you will find a copy of the B.C. Government approved waiver for outdoor activities on B.C. Crown Lands. As part of our License/Lease Agreement, we are required to provide \$2,000,000.00 Liability insurance, and have a signed Waiver from each guest. We ask that each of you fill out and sign the waiver properly:

- The Waiver must be signed twice in the body of the article;
- Your name, proper address and telephone number must be included;
- You must sign the Waiver and have it witnessed; and
- All of the above must be done in pen.

We realize that this is an intimidating document. It is intended to ensure that you are aware of the hazards associated with backcountry travel, and that you have stated in writing that you accept these hazards as part of the sport. The waiver means you must give up the right to sue Iconoclast Developments Ltd...Sorcerer Lodge for money if there is any negligence. Negligence means the want of due care. We suggest you get personal insurance and/or legal advice if you feel it is necessary.

As a backcountry participant, you have already accepted that risk is inherent in your activity. In the event, however, that an accident occurs, this Waiver is also a clear indication to your relatives that you were aware of and accepted certain risks in your chosen activity. We encourage you to have your family read the document as well.

It is impossible for anyone to guarantee safety when dealing with the wilderness environment. If after reading this Waiver you decide you do not wish to participate, please contact us immediately and we will cancel your reservation. If you are willing to accept responsibility for your participation in this activity, please fill out the Waiver and return it to us as soon as possible.

Thank you and we hope you have a wonderful holiday.

NAME: _____

TRIP DATE: _____

e-mail _____ **phone** _____

MEDICAL INFORMATION

List any allergies you have:

Are you on any medication? Yes _____ No _____ Please explain:

Describe any chronic disabilities or illnesses you may have: i.e. heart condition, diabetes, high blood pressure, epilepsy, asthma etc.

Do you have any physical limitations?

In case of emergency, please contact:

Home Ph: _____ Work Ph: _____

**SORCERER LODGE
Iconoclast Developments, Ltd.**

**RELEASE OF LIABILITY, WAIVER OF CLAIMS,
ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT
BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN
LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE**

PLEASE READ CAREFULLY!

CLIENT
INITIALS

| | | | |
|-----------------|----------|---------------|---------|
| LAST NAME | | FIRST NAME | INITIAL |
| STREET & NUMBER | | CITY | |
| PROV/STATE | ZIP CODE | DATE OF BIRTH | AGE |

TO: ICONOCLAST DEVELOPMENTS LTD., carrying on business as SORCERER LODGE, HER MAJESTY THE QUEEN IN RIGHT OF THE PROVINCE OF BRITISH COLUMBIA, CANADIAN HELICOPTERS LTD., and ALPINE HELICOPTERS LTD., and their directors, officers, employees, guides, agents, independent contractors, subcontractors, representatives, successors and assigns (all of whom are hereinafter collectively referred to as "**the Releasees**")

DEFINITION

In this Agreement, the term "**alpine activities**" shall include but is not limited to: alpine skiing, nordic skiing, telemark skiing, snowboarding, hiking, touring, mountaineering, rock climbing, ice climbing, expeditions, trekking, glacier travel; and all activities, services and use of facilities either provided by or arranged by the Releasees including orientation and instructional sessions or classes, transportation, accommodation, and all travel by or movement around helicopters or other aircraft.

ASSUMPTION OF RISKS – AVALANCHES, ALPINE TERRAIN, WILDERNESS TRAVEL, WEATHER, ETC.

I am aware that participation in alpine activities as defined in this Agreement, involves various risks, dangers and hazards. Avalanches occur frequently in the terrain used for alpine activities and may be caused by natural forces or by persons travelling through the terrain. I am aware that the Releasees may fail to predict whether the terrain is safe or whether an avalanche may occur. The terrain used for alpine activities is uncontrolled, unmarked, not inspected, and involves many risks, dangers and hazards in addition to that of avalanche. These may include, but are not limited to: cornices; crevasses; cliffs; trees, tree wells; tree stumps; forest dead fall; creeks; rocks; rockfall; boulders; holes and depressions on or below the snow surface; variable and difficult snow conditions; effects of high altitude including pulmonary edema and cerebral edema; equipment failure; encounters with domestic and wild animals; impact or collision with other persons; becoming lost or separated from one's party or guide; negligence of other persons; and **NEGLIGENCE ON THE PART OF THE RELEASEES, INCLUDING THE FAILURE BY THE RELEASEES TO SAFEGUARD OR PROTECT ME FROM THE RISKS, DANGERS AND HAZARDS OF ALPINE ACTIVITIES.** Communication in the alpine terrain may be difficult, and in the event of an accident or illness, rescue, medical treatment and evacuation may not be available or may be delayed. Alpine weather conditions may be extreme and can change rapidly and without warning.

I AM AWARE OF THE RISKS, DANGERS AND HAZARDS ASSOCIATED WITH ALPINE ACTIVITIES AND I FREELY ACCEPT AND FULLY ASSUME ALL SUCH RISKS, DANGERS AND HAZARDS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE OR LOSS RESULTING THEREFROM.

NOTICE TO SNOWBOARDERS AND TELEMAR SKIERS - INCREASED RISK

Unlike alpine ski boot/binding systems, snowboard, and some telemark boot/binding systems are not designed or intended to release and will not release under normal circumstances, thus increasing the risk of not surviving an avalanche.

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RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In consideration of the Releasees allowing me to participate in alpine activities as defined in this Agreement, and for other good and valuable consideration, the receipt and sufficiency of which is acknowledged, I hereby agree as follows:

1. **TO WAIVE ANY AND ALL CLAIMS** that I have or may in the future have against the Releasees and **TO RELEASE THE RELEASEES** from any and all liability for any loss, damage, expense or injury including death that I may suffer, or that my next of kin may suffer as a result of my participation in alpine activities, DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE OWED UNDER THE **OCCUPIERS' LIABILITY ACT**, R.S.B.C. 1996, c. 337, ON THE PART OF THE RELEASEES, AND FURTHER INCLUDING THE FAILURE ON THE PART OF THE RELEASEES TO SAFEGUARD OR PROTECT ME FROM THE RISKS, DANGERS AND HAZARDS OF ALPINE ACTIVITIES REFERRED TO ABOVE;

- 2. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any property damage or personal injury to any third party resulting from my participation in alpine activities;
- 3. This Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity;
- 4. This Agreement and any rights, duties and obligations as between the parties to this Agreement shall be governed by and interpreted solely in accordance with the laws of the Province of British Columbia and no other jurisdiction; and
- 5. Any litigation involving the parties to this Agreement shall be brought solely within the Province of British Columbia and shall be within the exclusive jurisdiction of the Courts of the Province of British Columbia.

In entering into this Agreement I am not relying on any oral or written representations or statements made by the Releasees with respect to the safety of alpine activities, other than what is set forth in this Agreement.

I CONFIRM THAT I HAVE READ AND UNDERSTOOD THIS AGREEMENT PRIOR TO SIGNING IT, AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS, ASSIGNS AND REPRESENTATIVES MAY HAVE AGAINST THE RELEASEES.

Signed this _____ day of _____, 20_____

Witness (print name)

Participant (print name)

Witness (signature)

Participant (Signature)