



## Outdoor Adventure Treks: Registration & Waiver Form

On all of our outdoor adventure journeys, we require that all participants answer the following questions in order for us to provide you with the highest level of commitment and quality service. Please complete this form and forward it to Gateway2Discovery in a timely manner.

**Journey Name:** \_\_\_\_\_ **Country** \_\_\_\_\_

**Start Date:** \_\_\_\_\_

**Personal Details:**

Title: \_\_\_\_\_ First: \_\_\_\_\_ Last \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

\_\_\_\_\_ Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_ Occupation: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

**Participant's Profile:**

Height (to fit your bike): \_\_\_\_\_ Age: \_\_\_\_\_

I am: Female / Male

Rooming Configuration (Please select preference): Twin Share \_\_\_\_\_ Single

Supplement \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

**Fitness Level:** An idea of good fitness is the ability to hike/cycle for up to 2-3 hours in moderate undulating terrain. Please Circle one category below:

Reasonable / Average / Good / Excellent

**Emergency Contact Name (person not traveling with you):**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Gateway2Discovery**

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Telephone (H) \_\_\_\_\_ Telephone (W) \_\_\_\_\_  
Facsimile: \_\_\_\_\_

**Medical & Dietary Details:**

Do you have any medical conditions, allergies and/or disabilities that we should know about? \_\_\_\_\_

\_\_\_\_\_

Do you take any special medications? (If yes please list all medications)

\_\_\_\_\_

\_\_\_\_\_

Do you have any special dietary requirements?

\_\_\_\_\_

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**Liability Waiver & Release:**

In all of our adventures, no matter how modest, there is an element of risk. That is their nature. Gateway2Discovery and its suppliers have taken all practicable steps to identify and minimize potential risks. However you must follow our instructions and use any safety equipment provided at all times. We reserve the right to withdraw any person who in our opinion is likely to endanger themselves or others. We also reserve the right to cancel any activity if we become concerned for any reason for your safety or that of any other person.

**Required:** Gateway2Discovery requires that all participants on all of our active journeys purchase a travel insurance to protect them against these potential risks. We offer an affordable and comprehensive travel insurance to protect you against cancellation fees, trip interruption trip delay/missed connection, medical expenses etc...Every participant **MUST** present proof of an adequate travel insurance before departure. In some strenuous trekking journeys, this insurance is already included. Absolutely no exceptions will be made.

I hereby release Gateway2Discovery and their respective directors, officers, employees and suppliers from any and all liability for any loss, injury or damage which has been or may hereafter be sustained by me as a result of, or directly or indirectly related to, my entering upon the Outdoor Adventure named above, and any related activities related.

In signing this document, I acknowledge that I have read, understood and agreed with the above safety terms.

Full Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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