

This form must be duly completed and signed by all persons authorized to visit or to engage in any activity not offered by, or that requires the authorization of the Société des établissements de plein air du Québec (SÉPAQ).

REGISTRATION

First name, last name			Address N° Street		
Arrival date YY MM DD		Departure date YY MM DD		City	Prov. Postal Code
Parent or guardian (if participant is a minor)			Country	Date of birth YY MM DD	
Person to contact in case of emergency -- Last name, first name			Address N° Street		
Telephone (home) ()		Telephone (work) ()		City	Prov. Postal code

Description of intended activity

Establishment Description of activity :	Localization of activity
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Descent of an expert level river, through sections containing steep inclines and expert level rapids. This activity is intended for experienced teams only.

Weather conditions

Details of itinerary:

Please describe your intended route, including the mode of transportation used at each stage (watercraft, ski, snowshoe, bicycle, etc.) and the sites where you intend to set up camp. Where possible, please include a detailed map of your itinerary.

Other information

Contact information			
Cell phone (#) ()	Satellite phone (#)	Owner	Telecom provider
GPS Beacon (#)	Radio (Type and frequency)	Vehicle (model, make, color)	License Plate (#)
Medication			
Person responsible for group (Last name, first name)			

Terms and conditions on reverse

Conditions for participating in an activity and disclaimer

1. Authorization;

Subject to the conditions set out in this form, SÉPAQ authorizes the signatory to participate in the activity indicated on the reverse (hereafter referred to as "the activity").

2. Disclosure of risk

I, the undersigned, acknowledge that I have been informed of the inherent risks in participating in the activity, including bodily injury and death.

3. Acceptance of risk

Having been informed of the inherent risks of the activity, I declare myself to be of a physical, mental, emotional state such as to allow me to participate in this activity or visit in full knowledge of the facts, and I hereby recognize and accept the potential risks involved in this activity. I understand that all rules related to participation in this activity must be followed, and that at all times, I will be the sole person accountable for my personal safety, and that I will adopt an attitude so as to prevent safety risks to myself or to other participants.

I will cease all participation in the activity if at any moment I perceive or sense that I am faced with an elevated risk or any unsafe conditions, or if I am no longer in such a condition as is necessary to continue participating in the activity, in all cases so as to avoid putting the safety of myself or the other participants at risk.

4. Waiver of responsibility and disclaimer

I hereby renounce all claims and/or rights to legal action that I have or could potentially have against the Société des établissements de plein air du Québec (SÉPAQ), its directors, employees and representatives, regarding liability for any loss or injury that I might suffer or incur due to my participation in this activity, whatever the cause may be.

5. Search and rescue

SÉPAQ recommends that you leave a copy of your itinerary with a parent or friend, taking care to indicate the time and date of your return, with instructions to call emergency services (911) in the event of your absence. SÉPAQ will not make any verifications as to your return. **Costs incurred during search and rescue operations are your responsibility.**

6. Other conditions

I recognize that all questions regarding the application and interpretation of this document are governed exclusively by the applicable laws of the province of Québec and the government of Canada, and I agree to be subject to the exclusive jurisdiction of the courts of the province of Québec, in the district of Québec City, regarding any legal actions, proceedings, or claims in this regard.

Other information relative to the activity

In order to participate in this activity, you must pay the entry fee to enter Parc National de la Jacques
This form must be filled out and deposited at the lookout booth (kilometer 0) or at the Centre de Découverte et de Services (Kilometer 10) du Parc National de la Jacques

Consent

I certify by my signature below that I have read and understand the information provided to me in this document, that I accept the terms, and undertake in this activity and and/or this visit in full knowledge of the facts.

Signature of participant (or parent or guardian if participant is a minor)

Date	YY	MM	DD
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Signature of SÉPAQ agent

Date	YY	MM	DD
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