



GENERAL BICYCE TOURING INDEMNITY

- Kindly complete ALL FIELDS and e-mail to info@daytrippers.co.za / fax to **086 6503254**

**NB - Your Name:	**
NAME AND DATES OF TOUR:	
Your CELL Number:	
Emergency Contact Person:	
Emergency tel. Number:	
Medical Aid Provider + number:	
Medical conditions/ allergies	
ID Number (passport # for foreigners)	
Dietary requirements. <i>(Where possible)</i>	
<p><u>Indemnity:</u> PLEASE READ BEFORE FILLING IN AND SIGNING THE INDEMNITY FORM</p> <p><i>ASSUMPTION OF RISKS</i> I am aware that a cycling vacation involves risks, dangers and hazards in addition to those normally associated with riding a bicycle on or off a road, including but not limited to: road surface hazards, equipment failure, the failure to wear safety equipment, the use of inadequate safety equipment, weather conditions, impact or collision with motor vehicles, other cyclists and other objects; the failure to operate a bicycle safely or within one's own ability; negligence on my part or on the part of other parties including other cyclists; I am also aware that there are national road restrictions pertaining to cycling on National Roads and am aware that this Tour does not constitute an EVENT. Cyclists may become lost or separated from their guide or group and agree that they have the ability to ride independently in such circumstances. To facilitate communication en route each cyclist is given a handy card with cell no's for bus drivers & Tour Director in the event of a problem. I confirm that it is my sole decision to participate in the activities associated with the cycling vacation and that I have consulted with my physician and have been given clearance to participate in the activities. I accept that my bicycle and personal possessions are carried by Day Trippers entirely at my own risk.</p> <p>Day Trippers cc reserves the right to make changes to the itineraries described in the program. Changes can be made due to local weather conditions, bad road conditions, room availability, or simply to improve a tour. Any significant change will be promptly notified to participants.</p> <p>I have read and understood the above conditions & I fully accept them and indemnify Day trippers CC of Unit # 8 Santos Park, 414 Voortrekker Road, Maitland, it's employees and suppliers in respect of any loss, damage or injury (direct or consequential) which I may sustain arising out of my participation in this ride, regardless of whether same is due to the negligence, (gross or otherwise) of the indemnified.</p>	
Date :	Signed: