

DECLARATION OF FITNESS TO ALPINE MOUNTAINEER, ROCK CLIMB, & ICE CLIMB _ do hereby declare that I am physically fit. I do not, and have not, suffered from any of the following conditions, which I understand may lead to a dangerous situation with regard to other persons or myself during Alpine Mountaineering, Rock Climbing, & Ice Climbing: Epilepsy, fits, severe head injury, recurrent blackouts or giddiness, disease of the brain or nervous system, high blood pressure, lung or heart disease, recurrent weakness or dislocation of any limb, diabetes, mental illness, drug or alcohol addiction, recent back injury, arthritis and severe joint sprains, chronic bronchitis, asthma, rheumatic fever, thyroid adrenal or other glandular disorder, recent blood donation or any condition that requires the regular use of drugs. I hereby declare that I have no physical or mental condition that should preclude me from participating in my chosen activity, that I am not participating against medical advice or treatment and that I have not been diagnosed by a registered doctor as having a terminal illness. I further declare that in the event that I feel ill or unwell, have any physical complaints whatsoever or if an injury is sustained of any kind during the course of Alpine Mountaineering, Rock Climbing, and/or Ice Climbing, I will notify the Instructor/Guide immediately and before moving any further. I have read the above Declarations, understand them, and I agree to be bound by them. Signature of Adult Participant Name of Adult Participant (Please Print) Date Address of Adult Participant Contact# Signature of Parent or adult legal_Guardian if Name of Parent or adult legal Guardian (Please Print) Date Participant is a Minor, and by their signature, they on my behalfrelease all claims that both they and I have Minor's Full Name Date If you cannot sign the above declaration because of any of the above conditions, you must notify the Instructor/Guide immediately before you climb. Owner/Lead Guide Burlington, VT Kel Rossiter

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