

Medical Questionnary

Name :	_	
Adress :		
Phone :		
Email:	 	
Name and age of the children with you :		
In case of emergency, who should we contact? (Name and	I phone n	umber)
Have you ever gone dog sledding before ? If you answered Yes. Where did you practice it	<i>Yes</i> □	<i>No </i>
Are you suffering or have suffered from : (please answer all the question)	YES	NO
Severe allergies (food or others)		
Asthma		
Cardiac illnesses		
Infract (in the last year)		
Stroke (in the last year)		
Diabetes		
Haemophilia		
Psychiatric troubles		
Do you use drugs or alcohol?		
Have you had abdominal or chest surgery? (in the last 6 months)		
Are your pregnant?		
If you have answered yes to any questions, you must talk t before the beginning of the dog sledding excursion.	o the exc	ursion leader

Initials: -----

ACKNOWLEDGEMENT AND ACCEPTANCE OF RISKS FORM

I, the undersigned, herby declare that I understand and acknowledge the nature of dogsled excursion and the risks related to such an excursion (tumble, sprain, fracture, hypothermia) and, therefore, give up and abandon all my rights for claims, legal or others, either personally or by a third person for my benefit, against AVENTURES NORD-BEC STONEHAM, its director, employees, agents and/ or representatives for any accident, injury or any lost of personal goods as well as any equipment deterioration which may occur while I am on a dog-sled excursion or engaged in any related activity.

I also declare, due to the nature of the activity, to be in good physical condition. Furthermore, I am currently sober and I am not under the influence of alcohol, drug or any medicines and I agree not to consume any of the above mentioned for the duration of the said excursion.

I understand French or English language, agree to respect all instructions which could be given to us by the director, guides and/or the employees of AVENTURES NORD-BEC STONEHAM, and undergo these activities at my own risks.

I also give authorizations to AVENTURES NORD-BEC STONEHAM to use any photographs, videos and/ or film taken by the said company, in which I could appear.

<u>For safety reasons</u>, my own, my passenger's, the other customers, the employees and the dogs, I agree <u>not to use my cell phone during the whole ride</u> otherwise I will be expelled without refund

I declare having read, understood and accepted this document as well as having answered frankly the medical questionnary on the back of this document.

Therefore I have signed in Stoneham on (date)
Signature :
How did you know us ?