

ALTAMAHA RIVER/FALL EXCURSION CANOE/KAYAK REGISTRATION FORM

Saturday, September 21, 2024

Eason's Bluff Landing to Carter's Bite Landing
(Approx. 9 miles)



Meet at **Eason's Bluff Landing** and conclude at **Carter's Bite Landing** (Approx. 9 miles).
Bring your canoes, kayaks, boats, jet skis, lifejackets, sunscreen and drinks.
The Board of Tourism will provide lunch for *registered* participants.

LUNCH WILL BE SERVED AT CARTER'S BITE LANDING

**REGISTRATION FEE: Adults: Pre-registration \$20.00 / Day of Event \$25
Children 10 years and under FREE.**

Non-profit group rate of 10 or more is \$15 per person (*must be noted on application*).

For canoe and kayak rentals, contact:

**Altamaha River Expeditions: Larry Brantley (Owner) Cell: (912) 294-3604 Email: larrybrantley@att.net
/ Current Rates \$45 single or \$55 double Canoe/Kayak**

*A limited number of kayaks will be available on site for last minute rentals.
Availability will be on a first come, first serve basis.*

**Only one shuttle service will be provided for participants, so please arrive prior to
8:00am. Shuttle will leave promptly at 8:00 a.m.**

A registration form needs to be filled out for each individual participating, even minors accompanying parents.
**Mail registration and check/payment to Baxley-Applying County Board of Tourism, 305 West Parker
Street, Baxley, Ga, 31513.** For more information call The Chamber of Commerce at (912) 367-7731 /
events@baxley.org visit our website at www.baxley.org and download application under Tourism.

Name _____ Age _____

City _____ State _____ Phone _____

Email: _____

How did you find out about this event: _____

Level of expertise: Beginner / Intermediate / Expert

**Please sign attached Waiver and Release of Liability and/or Parent-Guardian
Permission Form if applicable.**

Sponsored by the Baxley-Applying County Board of Tourism



PARENT/GUARDIAN PERMISSION FORM

(This form to be used for minors only – under 18 years of age.)

I hereby grant permission for my child _____ to participate in the Altamaha River Canoe Paddle provided by the Baxley-Applying County Board of Tourism on **September 21, 2024**

I fully understand and acknowledge that: (a) risks and dangers exist in my child's use of canoeing and kayaking, and my child's participation in river activities; (b) my child's participation in such activities and/or use of such equipment may result in injury or illness or death or damage to personal property; (c) these risks and dangers may be caused by other participants, or by accidents, or by the forces of nature or other causes. Risks and dangers may arise from foreseeable or unforeseeable causes including, but not limited to, selection of trail or river route, water level, weather conditions, risks of falling out of a canoe or kayak and such other risks, hazards and dangers that are integral to recreational activities that take place in a wilderness, outdoor or recreational environment, including risks from native flora and fauna,; and (d) hereby accept these risks and dangers.

I have been advised that my child must wear an approved personal floatation device at all times while on the water. I affirm that my child will not be under the influence of alcohol or controlled substance, and will not carry, use or consume these substances before or during his/her scheduled activities. Any claims or dispute arising from my child's participation in the Altamaha River Canoe Excursion or use of any equipment provided shall be venued in the Applying County Court in the state of Georgia.

My child is in good health and is at or above the minimum age stated in the Canoe Paddle advertising. I understand that strenuous physical exertion may be required and my child has no known physical disabilities or health problems, which will present any risk to his/her participation in the event. I permit the use of any photos, slides, films, or sketches of him/her taken or created during the day's activities for publicity, advertising, promotion or other commercial purpose. The above agreement shall be binding on my heirs, successor, assigns, administrators and executors.

I HAVE READ THE ABOVE, AND BY SIGNING IT AGREE. IT IS MY INTENTION TO GRANT PERMISSION FOR MY CHILD TO PARTICIPATE IN THE RIVER RAT RUN CANOE AND KAYAKING EVENT AND TO ASSUME AND ACCEPT ALL RISKS ASSOCIATED THEREWITH.

Parent Name Signature Date

Street (Apt) Address _____

City _____ State _____ Zip _____

Phone Number (s) (____) _____ Child's Name _____ Age _____

DO NOT LOSE – GIVE COMPLETED FORM TO YOUR GROUP LEADER PRIOR TO PARTICIPATION

Sponsored by the Baxley-Applying County Board of Tourism



WAIVER AND RELEASE OF LIABILITY

(Read Carefully)

In consideration of the Baxley-Appling County Board of Tourism (BACBT) furnishing services and/or equipment to enable me to participate in the Altamaha River Canoe Paddle event, I agree as follows:

I fully understand and acknowledge that outdoor recreational activities have (a) inherent risks, dangers and hazards and such exists in my participation of BACBT activities; (b) my participation in such activities and/or use of such equipment may result in injury or illness including but not limited to bodily injury, disease, sprains, fractures, partial and/or total paralysis, or other ailments that could cause serious disability or death; (c) these risks and dangers may be caused by the negligence of the BACBT employees, officers, agents or volunteers of BACBT; the negligence of the participants, the negligence of others, accidents, breaches of contract, the forces of nature or other causes. Risks and dangers may arise from foreseeable or unforeseeable causes including, but not limited to, guide decision making, including that a guide may misjudge terrain, weather, trail or river route location and water level, risks of falling out of or drowning while in a canoe or kayak and such other risks, hazards and dangers that are integral to recreational activities and/or use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the BACBT, employees, officers, agents or volunteers of the BACBT, or by any other person.

I, on behalf of my personal representatives, my heirs, and myself hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify BACBT and its employees, officers, agents or volunteers from any and all claims which may arise out of my participation in BACBT activities. I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by the BACBT, employees officers, agents or volunteers of the Baxley-Appling County Board of Tourism.

The venue of any dispute that may arise out of this agreement otherwise between the parties to which the Baxley-Appling County Board of Tourism or its agents is a party shall be either the Appling County Courthouse in the City of Baxley, Appling County, Georgia, or State Supreme Court in Atlanta, Ga.

I HAVE READ THE ABOVE WAIVER AND RELEASE, AND BY SIGNING IT AGREE. IT IS MY INTENTION TO EXEMPT AND RELIEVE THE BAXLEY-APPLING COUNTY BOARD OF TOURISM AND ITS BOARD MEMBERS, EMPLOYEES, AND ITS VOLUNTEERS OR AGENTS FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

Print Name _____ Age _____

Signature _____ Date _____

Emergency Contact Name _____ Relationship _____

Emergency Contact Phone: Daytime (____) _____ Day of the event: (____) _____

Please list any medical problems here: _____

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