

BYP NOVEMBER RETREAT
LIMITATION OF LIABILITY

THESE PARAGRAPHS DEFINE OUR RESPONSIBILITY WITH RESPECT TO BYP RETREATS AND CONTRACTED SERVICES. PLEASE READ CAREFULLY. YOUR SIGNATURE BELOW REPRESENTS ACCEPTANCE OF THE FOLLOWING TERMS AND CONDITIONS.

I WILL NOT HOLD LIZ COTTER OR OTHER INSTRUCTORS ASSISTING IN THE 6/2009 BYP RETREAT LIABLE FOR LOSS OR DAMAGE TO BAGGAGE OR PROPERTY OR FOR PERSONAL INJURY OR DEATH RESULTING FROM ACTS, OMISSIONS, OR NEGLIGENCE OF ANY PROVIDER OF SERVICES OR ACCOMMODATIONS OR DUE TO OTHER CAUSES BEYOND THE CONTROL OF LIZ COTTER OR OTHER INSTRUCTORS ASSISTING WITH THE RETREAT, OR FOR LOSS OR ADDITIONAL EXPENSES OR INCONVENIENCE RESULTING FROM ACTS OR OMISSIONS OF ANY CARRIER OR ANY OTHER SUPPLIER OF SERVICES OR FACILITIES, OR DELAYS, CANCELLATIONS, RE-ROUTINGS AND ANY OTHER ACTION CAUSED BY WEATHER, POLITICAL DISTURBANCES, STRIKES, LOCKOUTS, RIOTS, WAR, TERRORIST ACTIONS, INSURRECTIONS OR ANY OTHER REASON. LIZ COTTER MAY, IN HER SOLE DISCRETION, CANCEL OR CHANGE THE SCHEDULE OF ALL OR ANY PART OF ANY PROGRAM OR EXTENSION IF IT CONSIDERS SUCH ACTION TO BE IN THE GENERAL INTEREST OF PARTICIPANTS OR THEIR SAFETY, AND I WAIVE ALL CLAIMS AGAINST THE PROVIDERS ARISING FROM SUCH ACTIONS OR DECISIONS. LIZ COTTER RESERVES THE RIGHT TO SUBSTITUTE GUIDES/INSTRUCTORS AND TO ALTER THE ITINERARY WHEN & ONLY IF NECESSARY.

I UNDERTAKE THE FOLLOWING OBLIGATIONS. TO DECLARE ANY KNOWN ILLNESSES OR PRE-EXISTING HEALTH CONDITIONS AND TO SEEK MEDICAL ASSURANCE THAT IT IS SAFE TO PARTAKE IN A RETREAT OF THIS NATURE; TO SIGN THIS LEGAL WAIVER PRIOR TO THE COMMENCEMENT OF SERVICES CONTRACTED; TO ACCURATELY AND COMPLETELY FURNISH ANY PERSONAL INFORMATION REQUESTED BY LIZ COTTER FOR THE PURPOSES OF ORGANIZING RETREAT SERVICES; TO CAREFULLY REVIEW ALL INFORMATION FURNISHED ABOUT THE REQUESTED RETREAT; TO UNDERSTAND AS THOROUGHLY AS POSSIBLE THE PHYSICAL AND MENTAL DEMANDS OF AND RISKS TO BE ENCOUNTERED DURING THE RETREAT; TO PROPERLY EQUIP MYSELF FOR THE RETREAT; TO FOLLOW ENVIRONMENTAL GUIDELINES AND REGULATIONS WHILE IN ATTENDANCE IN ACCORDANCE WITH DIRECTION FROM LIZ COTTER AND BYP STAFF; TO ALWAYS RESPECT THE RIGHTS AND PRIVACY OF OTHER PARTICIPANTS. AT LIZ COTTER'S DISCRETION A PARTICIPANT MAY BE ASKED TO LEAVE THE RETREAT OR MAY BE DISALLOWED FROM ATTENDING SPECIFIC SEGMENTS OF THE RETREAT IF LIZ COTTER OR PART OF HER STAFF DEEMS PARTICIPATION TO BE POTENTIALLY DETRIMENTAL TO THE GROUP OR TO THE INDIVIDUAL PARTICIPANT.

CANCELLATION POLICY: FOR CANCELLATIONS RECEIVED 30 DAYS OR EARLIER FROM BEGINNING OF THE RETREAT, WE REFUND ALL BUT A \$200.00 NON-REFUNDABLE DEPOSIT. THERE WILL BE NO REFUNDS GRANTED FOR CANCELLATIONS MADE 29 DAYS PRIOR OR THEREAFTER TO RETREAT START AND ALL CHARGES APPLICABLE ARE TO BE PAID IN FULL TO LIZ COTTER AND BYP.

I, THE UNDERSIGNED WILL NOT HOLD LIZ COTTER, BYP OR HER STAFF RESPONSIBLE FOR ANY LOSSES OR EXPENSES INCURRED RESULTING FROM CANCELLATION, ACCIDENT, SICKNESS, STOLEN OR DAMAGED GOODS, ANY DEFAULT OF A COMMON CARRIER (AIR LINE, TRAIN, BUS, ETC.) WHETHER IT BE A RESULT OF INSOLVENCY, BANKRUPTCY, OR ANOTHER FINANCIAL DIFFICULTY, OR RESULTING FROM ANY OTHER TRAVEL SUPPLIER-RELATED PROBLEM.

SIGNATURE: _____

DATE: _____

PLEASE SUBMIT THIS ENTIRE REGISTRATION FORM, INCLUDING THE WAIVER AND PAYMENT INFORMATION, VIA E-MAIL LIZRIVERSIDE@GMAIL.COM, BY FAX 802-746-8567 OR LET US KNOW IT WILL BE ARRIVING HARD COPY VIA POSTAL MAIL TO PO Box 872 PITTSFIELD, VT 05762 ATTN: LIZ COTTER SO WE MAY RESERVE YOUR SPACE. SEE YOU SOON!