POTOMAC PADDLESPORTS

MATHER GORGE RAFTING TRIP INFO PACKET

Thank you for registering for a whitewater rafting trip with Potomac Paddlesports! You'll soon discover that, for a bunch of paddlers, we're pretty organized! This packet of information is provided to answer any questions you may have and ensure that you are fully prepared for your adventure with us. **Please review all of this information carefully at least one week prior to your trip**. You may contact us at any time with questions by calling 301-881-2628 or emailing us at info@potomacpaddlesports.com. For expert service when purchasing paddling clothing or equipment, please visit one of our two awesome retail stores! We look forward to paddling with you!

This packet contains the following:

Page 2	List of things to bring
Page 3	Adult/minor liability release form
Page 4–5	Medical questionnaire
Page 6–7	Directions and maps to trip locations

A few notes and answers to the most frequently asked questions:

1. You have up to two years from your date of purchase to complete your trip.
2. Please schedule or re-schedule your trip online at www.potomacpaddlesports.com/Login.aspx.
3. You have up until 72 hours before trip time to reschedule (please do so online). Guests who do not reschedule in time or don't show up forfeit their trip. No exceptions are made to this policy and we do not offer refunds.
4. Please do not wait until the last minute to prepare for your trip.
5. Please arrive and be prepared fifteen minutes prior to your trip start time. (Late arrivals will not be admitted.)
6. New Liability Release forms are required for each event. PLEASE COMPLETE YOUR PAPERWORK PRIOR TO ARRIVAL to ensure an on-time start for the group.
7. PFD (personal floatation device), paddle, helmet and raft are provided at no charge.
8. Although our rafting trips do not include intentional capsizing, you could accidentally end up in the water. Therefore, in the spring and fall we require that all participants wear neoprene wetsuits or other synthetic clothing that dries quickly. Patagonia Capilene is great for such a situation and it can be worn under basic nylon pants and jackets. Visit our retail store for assistance with purchasing the right clothing for the water.
9. Store your car key in a "Hide-a-Key" box or similar, somewhere on your vehicle during your trip.
10. All trips meet rain or shine. A decision to postpone due to lightning or other dangerous conditions is made on-site at the last possible minute. (Mother Nature often cooperates if we wait and see.)
11. For your safety and enjoyment, we request that you keep your personal information up to date via your schedule page. Please log in and update your info at www.potomacpaddlesports.com/Login.aspx.

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LIST OF THINGS TO BRING

The following list of things to bring is for your comfort, safety, and enjoyment of your on-water experience with us. ALL ITEMS ARE HIGHLY RECOMMENDED. Please call or visit our retail store for assistance.

- ☐ Pre-completed Release of Liability
- ☐ Pre-completed Medical Form (Only needed for your first trip or if anything has changed)
- ☐ Allergy medication (required for all severe reactions such as bee stings, peanuts, asthma, etc.)
- ☐ River sandals, river shoes or old sneakers you can get wet. No flip-flops, please.
- ☐ June, July, August, September: Bathing suit, surf trucks or shorts, synthetic tank-top or T-shirt
- ☐ April, May, October: Neoprene wetsuit or synthetic, quick-drying, warm clothing
- ☐ Light windbreaker or rain jacket, light long-sleeve fleece shirt (Suggested in case of inclement weather)
- ☐ Sunscreen
- ☐ Sunglasses
- ☐ Insect repellant (Optional)
- ☐ Floating eyeglass strap (so you don't lose your expensive prescription lenses)
- ☐ A towel and dry change of clothes to leave in your car for after your trip
- ☐ $5 park entrance fee (per vehicle, cash only)
- ☐ Tips for guide (Suggested)

POTOMAC PADDLESPORTS INCORPORATED

WAIVER AND RELEASE OF LIABILITY **(REQUIRED FOR EACH EVENT)**
READ BEFORE SIGNING

IN CONSIDERATION of being permitted to participate in any way in the Potomac Paddlesports Inc., sports and recreation program and related activities ("Activities") I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of paddlesports and related activities and that I am qualified, in good health, in proper physical condition to participate in such Activity and willingly agree to comply with the stated and customary terms and conditions of participation. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately notify the nearest official and discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) Paddlesports and related ACTIVITIES INVOLVE RISKS AND DANGERS OF DAMAGE TO PERSONAL PROPERTY AND SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE Potomac Paddlesports Inc., their respective ACA certified instructors, certified instructor trainers, and certified instructor trainer educators, administrators, directors, agents, officers, members, volunteers, independent contractors and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, INJURIES, DAMAGE TO PROPERTY, OR OTHER DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim. I further understand and agree that Potomac Paddlesports will not issue a refund under any circumstance.

4. By participating in or attending any activity in connection with this program, whether on or off the premises, I CONSENT TO THE USE OF ANY PHOTOGRAPHS, PICUTRES, FILM OR VIDEOTAPE TAKEN OF ME or provided by me for publicity, promotion, television, websites or any other use, and expressly waive any right of privacy, compensation, copyright or other ownership right connected to same.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PRINTED NAME OF PARTICIPANT:_____

SIGNATURE:_____ DATE:_____

ADDRESS:_____
(Street) (City) (State) (Zip)

DATE OF BIRTH: _____ PHONE: (_____) _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF PADDLESPORTS AND RELATED ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEE'S FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

PRINTED NAME OF PARENT/GUARDIAN:_____

ADDRESS:_____
(Street) `(City) (State) (Zip)

PARENT/GUARDIAN SIGNATURE: _____DATE:_____

(If participant is under the age of 18)

REVISED 4/11

POTOMAC PADDLESPORTS INCORPORATED

CONFIDENTIAL MEDICAL QUESTIONAIRE

Participant Name_____ Today's Date _____

Address_____ City _____ State_____ Zip _____

Phone (w) _____ (h) _____ Doctor_____ Phone _____

Medical History

Please describe condition/treatment where possible:

1. Are you under treatment for **any illness or condition**? **No Yes**
Describe:

2. Are you currently taking any **medication(s)**? **No Yes**
Describe:

3. Do you have any **disabilities**? **No Yes**
Describe:

4. Do you have any **fears or phobias**? **No Yes**
Describe:

5. Do you feel **forced to participate** in this activity? **No Yes**
Describe:

6. Do you have any history of r**espiratory problems**? **No Yes**
Describe:

7. Have you been directed to carry an **inhaler or other breathing device**? **No Yes**
Describe:

8. Do you have any **allergies**? **No Yes**
Describe:

9. Are you allergic to **bee stings**? **No Yes**
Have you been directed to carry an **epi kit**? **No Yes**
Is it with you now? **No Yes**

10. Do you have a **condition requiring regular medication**? (e.g. diabetes, epilepsy, etc.): **No Yes**
Describe:

11. Have you ever had **any injuries including back, spine, broken bones, dislocations, sprains, soft tissue injury**? **No Yes**

LIST injury, year of occurrence and current condition:

12. Do you have a **history of heart problems**? **No Yes**

(i.e. high cholesterol, heart murmur, MI, surgery, etc.):

Describe:

13. Has your doctor told you to **limit your activity** in any way? **No Yes**

Describe:

Note: Research has demonstrated that kayaking can raise heart and respiration rates in any participant and that persons with heart and respiratory problem histories can be placed at extreme risk. If this is true for you, consult your physician. If you are already on site, you may be asked to limit your participation.

14. Have you ever undergone **surgery**? **No Yes**

Describe:

15. Are you pregnant? **No Yes**

How many months?:

16. Are there **other factors** we should know about you before you start this program? **No Yes**

Describe:

17. I have answered the above questions accurately and completely. **No Yes**

18. I believe that I am in good health, and I affirm that my participation in Potomac Paddlesports activities will in no way aggravate any condition(s) present. If in doubt, I will seek and follow **medical** advice before participating. **No Yes**

19. The staff at Potomac Paddlesports has my permission to seek and/or administer emergency care in the event that: the health and well-being of the participant is involved; and the participant and/or parent/guardian is unable to respond or cannot be reached at the time of the emergency; or due to the nature of the emergency, there is insufficient time to contact the parent or guardian. **No Yes**

FOR MINORS ONLY

18. I believe that my son/daughter/ward is in good health, and I affirm that his/her participation in Potomac Paddlesports activities will in no way aggravate any condition(s) present. If in doubt, I will seek and follow **medical** advice before participating. **No Yes**

Signature_____ Date_____

Parent or Guardian Signature_____ Date_____

Please use reverse side of this page if additional space is needed to complete document.

POTOMAC PADDLESPORTS

DIRECTIONS: GREAT FALLS TAVERN VISITOR CENTER, POTOMAC, MD

These directions are for Mather Gorge Rafting trips meeting at the Great Falls Tavern Visitor Center in Potomac, MD. (You will be notified via email prior to your trip date whether you should meet us in Maryland or Virginia.)
For alternate routes or GPS you can use the addresss: 11710 MacArthur Boulevard, Potomac, MD 20854

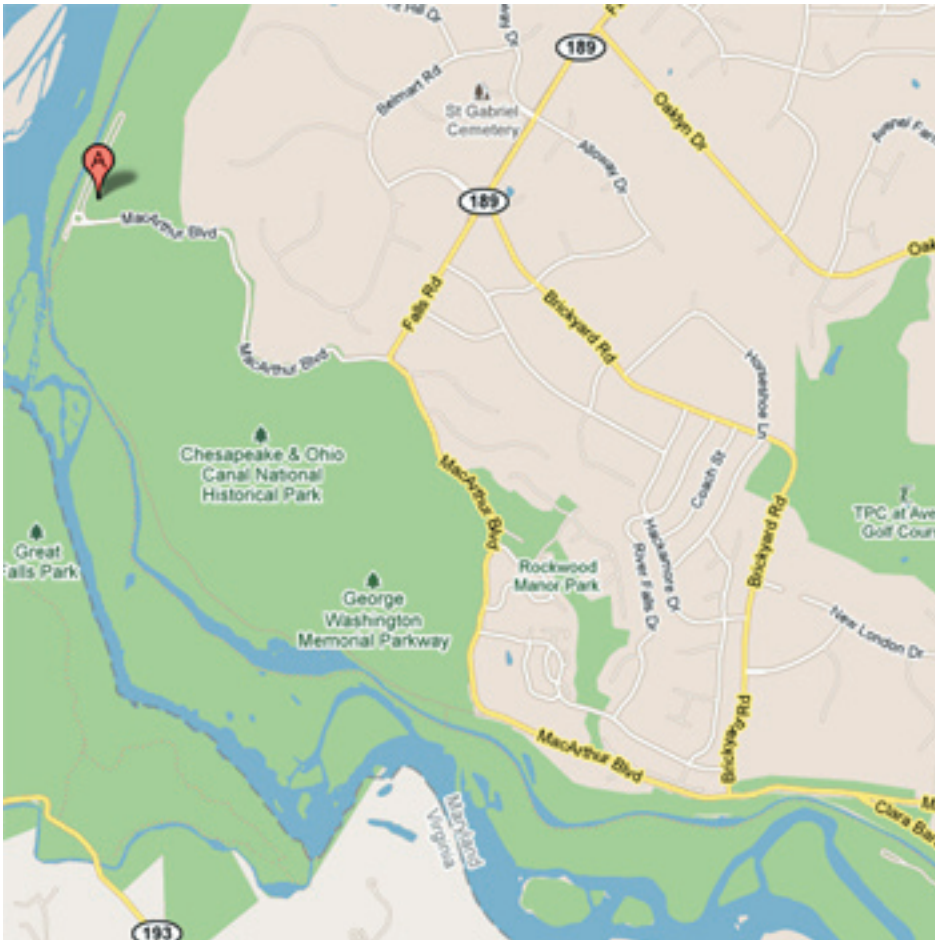
From the Capital Beltway (I-495) take exit 41 toward Carderock/Great Falls, MD and merge onto the Clara Barton Parkway

Take the Parkway 1.7 miles until it ends at Macarthur Blvd., and then turn left onto Macarthur Blvd.

Drive straight until you enter Great Falls National Park and reach the guard station. There is a $5 per vehicle entrance fee to get into the park. Park in the lot to your right, then meet your guides at the traffic circle behind the guard station.

Do not leave valuables in your vehicle. There are frequent break-ins in this area.

PLEASE have your waivers completed in hand and all your clothing and supplies ready to go fifteen minutes prior to start time so that we can start promptly.



POTOMAC PADDLESPORTS

DIRECTIONS: GREAT FALLS PARK, MCLEAN, VIRGINIA

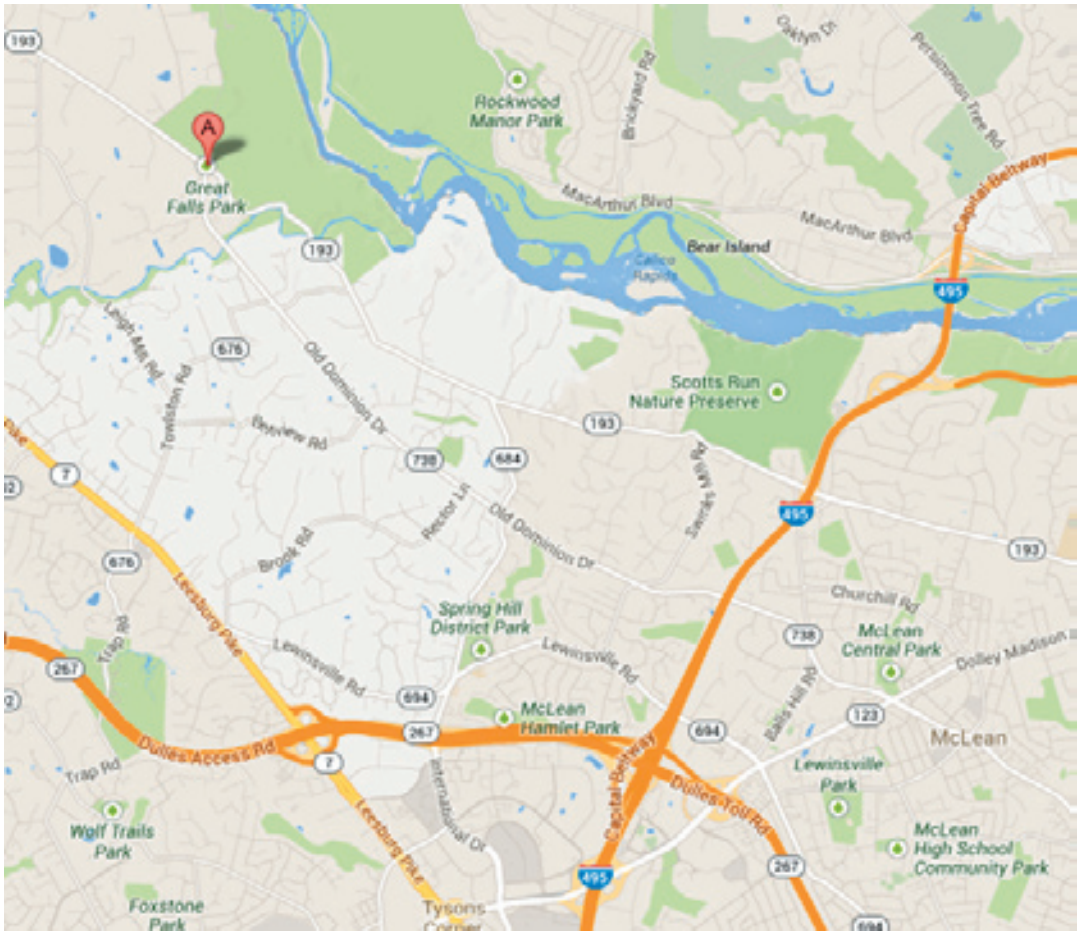
These directions are for Mather Gorge Rafting trips meeting at Great Falls Park, McLean, VA. (You will be notified via email prior to your trip date whether you should meet us in Maryland or Virginia.) For alternate routes or GPS you can use the addresss: 9200 Old Dominion Dr. McLean, VA 22102

From the Capital Beltway (I-495) take exit 44 for VA-193, Georgetown Pike.

At the traffic light at the end of the exit ramp, turn onto VA-193 West. (If you are coming from the north, you will turn right and if you are coming from the south, you will turn left.)

Continue west on VA-193 for about 3 miles, then turn right at the traffic light for Old Dominion Dr. There is a brown National Park Service sign for the park on the right side of the road at this intersection. The entrance station is about 1 mile down the road, and there is a $5 fee to enter the park.

Immediately after the entrance station, turn right and follow that road to what is known as the "climbers' parking lot". Park and you will see your guides there getting ready to go!

Do not leave valuables in your vehicle. There are frequent break-ins in this area.

PLEASE <u>have your waivers completed in hand</u> and all your clothing and supplies ready to go fifteen minutes prior to start time so that we can start promptly.