

Waiver for ARRO JET		
Ri	ide Date	
In th	nis waiver,	
e 0	Operator" includes Arro Jet Pty Ltd (ACN 672 496 338) a ntities, and their servants and agents, and any charterers wner, master and crew of any vessel used in provision of nd any other person or entity involved in provision of Act	

and associated s, and the the Activities,

"Activities" includes being a passenger on a vessel and all associated operations and activities including a high speed thrill ride.

Activities may involve a significant degree of risk of death or physical and mental injury, including but not limited to spinal injuries, head injuries, aggravation, acceleration or recurrence of a pre-existing injury or condition or disease that is harmful. These risks cannot be eliminated even with reasonable precautions.

Activities may also involve property loss or damage including but not limited to breakage or loss of items, and damage due to salt water. These risks cannot be eliminated even with reasonable precautions.

I acknowledge that the Activities involve amongst other things unpredictable, sudden, jarring and rapid movement, unpredictable weather, wind and sea conditions.

The Activities include dangerous recreational activities. The Activities involve obvious and inherent risks. The Operator does not represent that it has given me a comprehensive warning of every obvious or inherent risk involved in the Activities.

I warrant that I have the physical strength, fitness and condition to withstand the Activities without illness, injury or aggravation. I warrant that I will before the commencement of Activities secure and protect my personal property against risk of loss or damage from the Activities.

I knowingly and freely assume all risks, both known and unknown, and assume full responsibility for my participation in Activities.

I acknowledge that the Activities may consist of participation in recreational services, including an activity that involves a significant degree of physical exertion or physical risk and is undertaken for the

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purpose of recreation, enjoyment or leisure, and that the guarantees in Part 3-2 in Subdivision B of Division 1 of the Australian Consumer Law are therefore excluded.

I waive any liability, and agree the Operator excludes any liability, that the Operator might have to me for death or physical or mental injury or the contraction, aggravation or acceleration of a disease from the supply of recreational services or otherwise arising from a failure to comply with the guarantees in Part 3-2 in Subdivision B of Division 1 of the Australian Consumer Law.

I agree to abide by and comply with any rules, instructions or directions given to me by the Operator and understand that non-compliance may result in personal injury, death, property loss or damage or removal at my own expense and I shall ensure that all minors below shall so abide and comply.

If I am injured or ill the Operator may provide evacuation, first aid and medical treatment at my expense and I consent to such evacuation, first aid or medical treatment.

This waiver, the passenger's ticket and any other terms and conditions propagated by the Operator represent my contract of carriage with the Operator. Any term and condition which is inconsistent with any applicable legislation shall be void to the extent of the inconsistency only.

I am of lawful age and legally competent to sign this waiver of liability and indemnity. I have read and understood the contents of this waiver of liability and indemnity and I voluntarily agree to be bound by its terms, or, I have acquired the written consent of my parent or guardian. Where I have signed this waiver as a parent or guardian of a minor or minors, then references to myself are to be taken to include references to the minor/s.

This contract is governed by the laws of Queensland.

I UNDERSTAND THAT BY SIGNING THIS AGREEMENT I HAVE GIVEN UP SUBSTANTIAL RIGHTS. I HAVE READ AND UNDERSTOOD AND SOUGHT CLARIFICATION OF ANY TERMS BEFORE SIGNING. I HAVE DONE SO VOLUNTARILY IN ORDER TO BE PERMITTED TO PARTICIPATE IN THIS DANGEROUS RECREATIONAL ACTIVITY.

Do you have any of the fo	ollowing?		
Back Injury Neck I	Injury Pregnancy If you have ticked any o	f the boxes, please advise the Arro Jet Staff.	
First Name	Last Name	DOB	
Phone Number	Email		
Street Address			
City Postal/Zip Code			
Minors			
First Name	Last Name	DOB	
First Name	Last Name	DOB	
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Would you like to receive sp	pecial offers from The Tour Collective?		
Yes			

Signature for participant and/or parent guardian for minor