CONTRACTUAL ASSUMPTION ACKNOWLEDGEMENT OF RISKS AND LIABILITY WAIVER AND RELEASE AGREEMENT

IN CONSIDERATION of being permitted to participate in the charter/rental provided by 410 Charter, Inc/Wildquest Ltd. for myself and/or any minor children for whom I am the legal parent/guardian or otherwise responsible, and for my/our heirs, personal representatives, or assigns:

ACKNOWLEDGEMENT OF RISKS

I fully acknowledge that some, but not all of the risks of participating in the charter in which I am about to engage may include (1) wind shear, inclement weather, lightning, variances and extremes of wind, weather and temperature; (2) any sense of balance, physical condition, ability to operate equipment, swim and/or follow directions; (3) collision, capsizing.

	sure to the elements, hypothermia, impact of the body upon
the water, injection of water into my body orifices, and/or d	C, () 1
resulting from insects, animals and marine life forms; (5) equip	
or sun related injuries or Illness, including sunburn, sunstroke	
diminish my/our reaction time and increase the risk of an accide	ent; (8) slippery decks and/or steps when wet; (9) swimming
and snorkeling	
	Initials
I specifically acknowledge that I have been given instructions/	
this charter to my complete satisfaction, I understand them fully which I am about to engage.	and I am physicany/mentany able to participate in the charter

I understand that past or present medical conditions may be contraindicative to my participation in the charter/rental. I affirm that I am not currently suffering from a cold or congestion or have an ear infection. I affirm that I do not have any infectious disease or illness (e.g., COVID or similar variants). I affirm that I do not have a history of seizures, dizziness, or fainting, nor a history of heart conditions (e.g., cardiovascular disease, angina, heart attack). I further affirm that I do not have a history of respiratory problems (e.g., emphysema or tuberculosis). I affirm that I am not currently suffering from back, spine and/or neck injuries. I affirm that I am not currently taking medication that carries a warning about any impairment of my physical or mental abilities.

T *4* 1		
Initiale		
Initials		

CONTRACTUAL/EXPRESS ASSUMPTION OF RISK AND RESPONSIBILITY

I fully agree to assume all responsibility for all the risks of the [Dolphin Retreat] to which I am about to engage, whether identified above or not (I FULLY UNDERSTAND THAT I UNDERTAKE EVEN THOSE RISKS ARISING OUT OF THE NEGLIGENCE OF THE RELEASEES NAMED BELOW). My/Our participation in the charter is completely voluntary. I assume full responsibility for myself and any of my minor children for whom I am responsible. This responsibility that I assume on my behalf and that of my minor children, or those children for whom I am legally responsible, extends to any bodily injury, accidents, illnesses, paralysis, death, loss of personal property and expenses thereof as a result of any accident which may occur while we participate in the activity. I COMPLETELY UNDERSTAND AND AGREE TO ACCEPT ALL RESPONSIBILITY ON BEHALF OF MYSELF AND MY MINOR CHILDREN, OR THOSE CHILDREN FOR WHOM I AM LEGALLY RESPONSIBLE, EVEN IF THESE INJURIES, DEATH, OR LOSS OF PERSONAL PROPERTY ARE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEES NAMED BELOW.

T • 4 • 1		
Initials		
HIHUAIS		

This Agreement shall be governed by the laws of Miami-Dade County, Florida. Any legal action relating to or arising out of this agreement against or with respect to by 410 Charter, Inc/Wildquest Ltd., Inc shall be commenced exclusively in United States of America . Any legal action relating to or arising out of this Agreement against or with respect to any of it by 410 Charter, Inc/Wildquest Ltd. affiliated or related companies shall be commenced exclusively in the United States of America . I agree that I will reimburse in full any attorney fees incurred by the assured or their Insurers to defend any legal action under this agreement.

			Initials	
PRINICIPALS, AND EACH AND PROPERTY AN CRUISELINE OF FROM ANY AND DAMAGE (INC RESULT OF M	LEASE 410 Charter, Inc/WildQuest Ltd. TO DIRECTORS, OFFICERS, AGENTS, END EVERY LANDOWNER, MUNICIPAL ACTIVITY IS CONDUCTED, AS WE OR COMPANY WHO FACILITATED PAND ALL LIABILITY OF ANY NATURE CLUDING DEATH) TO ME OR MY MINITY/OUR PARTICIPATION IN THE ACTIVACE OF ANY OF THE RELEASEES NATURE OF THE RELEASE OF THE THE RELEASE OF THE RELEASE OF THE RELEASE OF THE RELEASE OF THE THE RELEASE OF THE RELEASE OF THE RELEASE OF THE RELEASE OF THE THE RELEASE OF THE RELEASE OF THE RELEASE OF THE RELEASE OF THE T	MPLOYEES, AN L AND/OR GOVE LL AS THEIR IN ARTICIPATION A E FOR ANY AN IOR CHILDREN VITY, EVEN IF (ID VOLUNTEERS, THEIR INSURERS, ERNMENTAL AGENCY UPON WHOSE ISURERS, IF ANY, EACH AND EVERY IND/OR PURCHASE OF TICKETS, OR DEALL INJURY, PROPERTY LOSS OR AS WELL AS OTHER PERSONS AS ACAUSED BY MY NEGLIGENCE OR BY	
			Initials	
I have read this assumption and acknowledgement of risks and release of liability agreement I understand fully that it is contractual in nature and binding upon me personally. I further understand that by signing this document I am waiving valuable legal rights including any and all rights I may have against the owner, the renter/charterer, the operator named above, or their employees, agents, servants or assigns. I FULLY AGREE IN CONSIDERATION FOR BEING ALLOWED TO PARTICIPATE IN THE CHARTER TO HOLD HARMLESS AND IDEMNIFY THE OWNER, THE OPERATOR NAMED ABOVE OR THEIR EMPLOYEES, AGENTS, SERVANTS OR ASSIGNS FOR ANY INJURY WHICH MAY BEFALL ME, MY MINOR CHILDREN OR THOSE CHILDREN FOR WHOM I AM LEGALLY RESPONSIBLE (INCLUDING DEATH).				
Print Name:		Date of Birth:		
Address:		Email:		

Date:

Signature: