

## **4WDTrips – Disclaimer for Passengers (Short Trips) Statement of General Responsibilities and Duty of Care**

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1. 4WDTrips will use its best endeavours and make every effort to operate all trips as advertised but reserves the right to amend, vary, re-route or cancel a trip where track, weather conditions or participant experience and/or vehicles deem it to be necessary.
2. 4WDTrips cannot guarantee exact arrival and departure times.
3. 4WDTrips reserves the right to employ drivers and vehicles other than those advertised should the need arise.
4. At the discretion of 4WDTrips, a trip may not proceed if minimum numbers are not achieved. 4WDTrips shall advise you as soon as possible and place this information on the website.
5. 4WDTrips discourages young children (0-8) from participating on trips unless under strict supervision of two adults at all times. For older children, one responsible adult is required.
6. No pets are permitted on any 4WD trips visiting or passing through any National Park and otherwise dogs must be muzzled and on a leash at all times when out of a vehicle. No pets are permitted in any vehicle operated by a 4WDTrips driver.
7. I/we understand and accept that 4WDTrips events may be challenging, self-sufficient experiences. I/we agree to observe the safety and other instructions of the authorised trip leader/guide/driver for the duration of the trip.
8. I/we understand and accept that all bookings made with 4WDTrips are subject to the terms and conditions such as refund policies as outlined on the website.
9. While every care and precaution is taken, I/we understand that 4WDTrips is not liable for the sickness or injury of any participant.
10. I/we confirm that we do not have any pre-existing medical condition or disability which will impact on or prevent me/us from participating in or completing this trip or be a burden to other participants.
11. Where a trip is carried out in an area without proper medical services, 4WDTrips is expressly authorised by me/us and each participant for whom we are responsible to take such action as is necessary for the provision of medical services. This shall include, but not be limited to, the arrangement of any medical evacuation service by air/road, the attendance of any doctor/nurse, and any necessary hospital service. I/we understand that all associated costs of the provision of medical services are to be borne by me/us.

I/we understand and agree to the Terms & Conditions set out on all pages of this agreement.

**NAME(S) (Please print):**

.....Contact Phone:

.....Contact Phone:

**Signed:**

.....(Date).....

.....(Date).....