



Incredible India



Great Himalayan
Adventure Studio Pvt. Ltd.

INDEMNITY BOND AND DECLARATION

This Indemnity Bond & Declaration (“Bond”) by the undersigned (hereinafter referred to as the “Participant”), in Favor of *Great Himalayan Adventure Studio Private Limited* and its brand *Himalayan Adrenaline* (hereinafter collectively referred to as the “Organizer”).

1. Participation and Assumption of Risk

- 1.1 The Participant hereby declares that he/she is voluntarily participating in the adventure sports and activities organized by the Organizer.
- 1.2 The Participant acknowledges and understands that these activities inherently involve risks, including but not limited to physical injury, disability, or death.
- 1.3 The Participant accepts full responsibility for his/her own safety and wellbeing and agrees to strictly follow all rules, regulations, and instructions prescribed by the Organizer and its instructors.

2. Use of Equipment and Liability for Damage

- 2.1 The Participant acknowledges receipt of equipment and gear, which may include (but is not limited to): ATVs, Quad Bikes, Motorbikes, Bicycles, Rackets, Bows & Arrows, Paintball Markers, Protective Gear (Guards, Helmets, Goggles, Chest Guards, Facemasks), Barrel Socks, and Overalls.
- 2.2 The Participant undertakes to return all equipment in the same condition as provided.
- 2.3 In the event of damage or loss to any equipment, whether intentional or unintentional, the Participant agrees to bear the full cost of repair or replacement, as determined solely by the Organizer.
- 2.4 Where repairs cannot be completed during the Participant’s presence, a security deposit of Rs. 50000/- in case of ATV & Rs. 20000/- in case of Paintball Marker, in addition to estimated downtime charges (calculated at a minimum of INR 10,000/- per day for ATV & INR 3000 for paintball marker and other amount as decided by the Organizer), shall be paid by the Participant on spot.

3. Waiver of Liability and Indemnity

- 3.1 The Participant hereby irrevocably declares that the Organizer shall not be held liable or responsible for any injury, loss, damage, disability, or death arising from participation in the activities.
- 3.2 The Participant assumes all risks, whether arising from contact with other participants, obstacles, natural conditions, or otherwise.
- 3.3 The Participant agrees to indemnify and keep indemnified the Organizer from any claims, demands, or liabilities that may be raised by the Participant, his/her family members, legal representatives, heirs, or any institution in connection with any injury, damage, or fatality.

4. Fitness Declaration

- 4.1 The Participant affirms that he/she is physically fit and medically capable of undertaking the activities organized by the Organizer.
- 4.2 The Participant accepts full responsibility for any health issues, ailments, or injuries that may arise during or as a result of participation.

5. Binding Effect

- 5.1 This Bond shall be binding on the Participant, his/her heirs, executors, administrators, legal representatives, successors, and assigns.
- 5.2 The Participant confirms that he/she has read and fully understood the terms of this Bond and voluntarily agrees to the same without any coercion or undue influence.
- 5.3 The Participant confirms that they are in acceptance of all policies and terms & conditions of the Organizer details can be found here <https://www.himalayanadrenaline.com>.
- 5.4 Any dispute / legal matter of what so ever nature and type are only and only restricted / Subject to Courts of Palampur. Himachal Pradesh.

Signature of participant / Signature of Parent /Guardian (for Minors/participants aged below 18 years): (Incase the signatory signs on other participants behalf he / she agrees to take responsibility of all participating persons)
Mobile No:

CIN: U74999HP2017PTC006461

Regd office: Raipur Tea Estate. PO Thakurdwara. Tehsil Palampur. Kangra Himachal Pradesh 176102.

Email: mayur@ghas.in I Ph: +91 97699 47009 & +91 98162 17644



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PHOTO ID TO BE SHARED BEFORE ACTIVITIES

***Kindly insure accurate details as this is submitted to Government**

| Group Name | | | | | | |
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| Group Coordinators Name | | | | | | |
| Group Coordinators Number | | | | | | |
| Indemnity & Policy Undertaker | | | | | | |
| Date: | | | | | | |
| S No. | Participants Name | Address | Aadhar Card / Passport No | Participants Contact Number | Next of Kin Name | Next of Kin Number |
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Signature & Name
Indemnity & Policy Undertaker /
Group Cordintor