

LETTER OF CONSENT FOR WAIVER OF LIABILITY

IN THE EVENT OF AN ACCIDENT OR INJURY, A CLAIM FOLLOWED BY AN INCIDENT REPORT FROM CUSTOMER DOCUMENT MUST BE SUBMITTED THE DAY OF YOUR JUMP. ANY CLAIMS MADE AFTER THIS DATE WILL NOT BE ACCEPTED

I confirm that I, _____, have read the important information in all the terms (1-9) below about bungee jumping that is managed by STANDARD MOVE K.K. (hereinafter "Organizers"). Further, I confirm that I fully understand the inherent risks of bungee jumping, and that I fully understand, accept and agree to the rights of the Organizers and the content of its insurance policy for said bungee jumping. Further, I am signing this agreement voluntarily.

1. I fully understand & acknowledge that participating in bungee jumping has inherent risks, including but not limited to physical injury & even death.
2. I agree to observe and obey all the conditions necessary to participate in bungee jumping (including; being over 15 years old; being within the weight range of 40kg to 120kg; and being in good health). I assert that I have no injury or disease that would affect my ability to safely participate as such. I also agree to refrain from participating in bungee jumping when I am pregnant or under the influence of alcohol. I also understand and acknowledge that if I conceal an illness or injury, when participating in bungee jumping, the insurance policy as stipulated in article 3 shall not apply to me and that I shall be liable for my own acts (and omissions), accordingly.
3. I understand the Organizers provides the following insurance cover for participating in bungee jumping: Death or residual disability: 10 million JPY

I also understand and acknowledge that this insurance policy does not include the costs of medical care, transportation or property damage.

4. I agree to observe and obey all posted rules, to follow any instructions or directions given by the Organizers through its staff, and to be fully aware of all safety matters. I also understand and acknowledge that if I do not observe and obey the said rules and instructions given by the Organizers, the Organizers has the right to cancel my participation in bungee jumping, and that I shall be liable for my own actions (and omissions), accordingly.
5. I intend my signature to be a complete and unconditional release of all liability for the Organizers and its staff due to act of god (including unpredicted natural phenomenon).
6. I also understand and acknowledge that I shall be liable to pay the repair and/or replacement costs for any damage to the the Organizers' property that is caused in whole or part by my intentional acts or omissions, or my failure to observe the rules and instructions given by the Organizers and its staff to any facilities or equipment operated and managed by the Organizers.
7. I consent to medical care and transportation as the Organizers or medical professions may deem appropriate in order to obtain treatment in the event of my falling ill or becoming injured during my participation in the bungee jumping.
8. I consent to the the Organizers' use of my image at no cost in photographs, motion pictures or recordings taken at any of the Organizers' bungee jumping sites for use in the Organizers' advertising, marketing or promotion throughout the world.
9. I agree that the Organizers' reserves the right to cancel bungee jumping in the event of inclement weather, natural or man-made disasters, acts of god or for any other reason that the Organizers deem, at its discretion, necessary for safety & security of participants or due to difficulty of operating bungee jumping.

Date	/ /	Have you had any previous experience bungee jumping		Yes · No
Date of birth	/ / (Age)	Sex	M · F	
Are you under the influence of alcohol or drugs	Yes · No		Pre-existing illnesses or injuries (e.g. heart disease, broken bones)	Yes · No
Are you pregnant	Yes · No		If yes, please describe your illness or injury	
Name (print)			Telephone number/ Emergency contact number	/
Signature				
Address	〒			
Parent/Guardian signature (Required if participant is under the age of 20)			Relationship to participant:	