



## FAM TRIP WAIVER AND RELEASE

I, \_\_\_\_\_ acknowledge that I will be participating in a familiarization trip by the Maui Visitors Bureau and other sponsoring organizations to Maui, Moloka'i, and/or Lāna'i and, if applicable, other Hawaiian Islands which may include, among other things, roundtrip air travel, hotel accommodations, tours, attractions and/or other activities and some meals ("Fam Trip"). By accepting and participating in the Fam Trip, I for myself, my personal representatives, successors, assigns, heirs, legal representatives, and next of kin agree to waive and release the Maui Visitors Bureau, the Hawai'i Visitors and Convention Bureau, and their respective officers, directors, employees, and agents (collectively, "MVB") from and against any and all rights and/or claims I may have for any loss or damage arising out of or in any way related to, directly or indirectly, the Fam Trip.

Specifically, this Waiver and Release is intended to include, but not be limited to, any injuries, loss, or damage that may be caused by the negligence of MVB in sponsoring and/or organizing the Fam Trip. This Waiver and Release is further intended to include, but not be limited to, any consequential damages which may result from delays, cancellations, modifications of itineraries, or complaints that arise from transportation, accommodations, tours or other planned or scheduled activities. I further acknowledge that by organizing and otherwise participating in the booking of transportation or activities for the Fam Trip, MVB is not acting as my agent. However, to the extent MVB is construed as my agent, I acknowledge that MVB's agency is limited to the arranging of transportation and/or activities, and that MVB is not assuming liability for any injury, damage, loss, or accident that may be caused by the negligence of those persons or entities that are providing said transportation and/or activities.

I hereby certify that I am 18 years of age or older and that I have read this Waiver and Release and fully understand its contents. I understand that I am giving up rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law. I understand and agree that this Waiver and Release will be construed in accordance with the laws of the State of Hawaii and the United States of America and that, if any portion of this Waiver and Release is held to be invalid, the balance shall continue in full force and effect.

\_\_\_\_\_  
Print Participant's Name

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Participant's Address, City, State, Zip Code

(not applicable)  
\_\_\_\_\_  
Participant's Social Security No.

\_\_\_\_\_  
Emergency Contact Person

\_\_\_\_\_  
Emergency Contact Phone Number

\_\_\_\_\_  
Relationship to Participant

\_\_\_\_\_  
Date

Fam Trip Name: \_\_\_\_\_