



**FAM/PRESS TRIP INDIVIDUAL VISIT  
WAIVER AND RELEASE FORM**

I, \_\_\_\_\_, acknowledge that I will be participating in a Fam, press trip or individual visit hosted by the Maui Visitors Bureau (“MVB”) also known as the Maui Visitors and Convention Bureau (“MVCB”), as well as other sponsoring organizations, to include Maui, Moloka‘i, and/or Lāna‘i and, if applicable, other Hawaiian islands. Offerings may include, but are not limited to, round trip air travel, hotel accommodations, tours, attractions and/or other activities and some meals. By accepting and participating in the Fam, press trip or individual visit, I for myself, my personal representatives, successors, assigns, heirs, legal representatives, and next of kin agree to waive and release MVB, MVCB, the Hawai‘i Visitors and Convention Bureau, and their respective officers, directors, employees, and agents (collectively, the “Visitor Bureau Entities”) 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, press trip or individual visit.

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 the Visitor Bureau Entities in sponsoring and/or organizing the Fam, press trip or individual visit. 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, press trip or individual visit, the Visitor Bureau Entities are not acting as my agent. However, to the extent the Visitor Bureau Entities are construed as my agent, I acknowledge that the Visitor Bureau Entities’ agency is limited to the arranging of transportation and/or activities, and that the Visitor Bureau Entities are 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 Hawai‘i 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.

Participant’s Name \_\_\_\_\_

Participant’s Address, City, State, Zip \_\_\_\_\_

Participant’s Phone \_\_\_\_\_

Emergency Contact Name and Phone \_\_\_\_\_

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

Fam Trip Dates: \_\_\_\_\_

Signature and Date \_\_\_\_\_