Over 18's



Acknowledgement of Risk & Responsibility, Waiver of Liability and Conditions of Use

Lead Participant Name:	Session Date: Session Time:		
Address:	Mobile Number:		
Postcode:	Email Address:		
Emergency Contact Details			
Name:	Contact No:		
Relationship to Participant:			

This waiver and terms and condition affect your legal rights. Taking part in this activity could cause serious injury or death. Should you have any concerns regarding any aspect of your health prior to participating, you should consult your doctor and receive medical clearance before participating. Please read and understand the conditions prior to signing.

- 1) I confirm that I am 18 years or older, at least 140cm tall and under 95kgs in weight.
- 2) I am voluntarily participating in this Activity with the knowledge of the dangers involved and I agree to accept and all risks of loss, injury or death.
- 3) I understand and acknowledge that it is necessary to maintain control of the E-Scooter at all times to minimise this risk and to operate in a careful, considerate and safe manner, with due consideration for my own safety, the safety of my fellow riders and members of the public.
- 4) I agree to abide by the Code of E-Scootering on the reverse of this form, together with the safety instructions and advice given to me by the instructor before undertaking the Activity.
- 5) I understand and acknowledge that the Activity provided by Gravity IOM Limited requires a reasonable level of fitness and ability.
- 6) I understand that a helmet is provided for my own safety and I agree to wear the helmet and have it fastened at all times when operating the E-Scooter.
- 7) I acknowledge that I am responsible for my own safety and that of any under 18's that I have signed responsibility for on a separate form.
- 8) I confirm that I am not under the under the influence of drugs or alcohol.
- 9) I confirm that I do not have any health issues or medical conditions which might may prevent me from riding safely and have the effect of making it more likely that I be involved in an accident which could result in injury to myself or others.
- 10) To the best of my knowledge I am not pregnant.
- 11) In the event of an accident or any damage, loss, injury or death, I acknowledge that the Company will not be liable for any direct or indirect loss, damage or injury arising from or in connection with the Activity (except for death or personal injury caused by the Company's negligence) and I waive all and any claims against the Company in this respect.
- 12) I agree to follow instructions of Gravity IOM Limited's staff members and understand that failure to comply may terminate my session.
- 13) I agree to cease operation of the E-Scooter if I am concerned in any way about its operation ${\sf C}$
- 14) I understand that I will be held liable for any damage caused to equipment (and an associated costs and losses arising from damage) during the session caused by my misuse or damage due to failure to comply with instructions provided.

By signing this waiver below, I accept and assume all of the risks which exist in the Activity offered. I also confirm that I choose to participate being fully aware of these risks, and that my participation is voluntary.

Photography: I grant Gravity IOM Limited, its representatives and employees the right to take photographs and/or video of me during the Activity.

I authorise Gravity IOM Limited, it's assigns and transferees to copyright, use and publish the same in print and/or electronically for publicity, advertising, illustration used by Gravity IOM Limited for publicity, marketing and social media purposes. I understand that I can request to have my image removed.

Please indicate below by circling "YES" or "No" under the permissions to use photos or videos.

	Print Name	Signature	Permission to use photos	Permission to use video
Lead Participant			Yes / No	Yes / No
Participant 2)			Yes / No	Yes / No
Participant 3)			Yes / No	Yes / No
Participant 4)			Yes / No	Yes / No