Colombia Bike Tours, a member of

En bici por Francia SAS – Acknowledgment of Responsibility & Liability Form





I, (name, surname)	identified with the identification
document (ID, passport, etc.) number	, domiciled at
(full address)	
in my capacity as a participant to the trip in	n (country) between
(date of departure) and (date of re	turn) I declare that I
release and exempt from liability, compensation and	filing any claim against Mr. Yves Millière
and Colombia Bike Tours, as a member of tour operat	or En bici por Francia SAS, in case of any
accident occurred during the trip, and particularly in o	case of falling over when riding a bicycle,
that is not the responsibility of the organization of the	e trip.
I also take responsibility and declare that I have perso	nal medical and repatriation insurance
that covers any eventuality in the event of an acciden	t.
Also, I promise to be punctual and respect the schedu	lles of the activities organized during the
trip, and I promise not to disturb the group with my \ensuremath{b}	ehavior.
Under my signature I certify that I have read and under	erstood this agreement and accept it
voluntarily under the agreed terms.	
Signed in (city), On (date)
Signature:	

