

RISK ACCEPTANCE - AFFIDAVIT DECLARATION DISCLAIMER

I ne undersigned,
Nationality Passport N°,
hereby certifying that being of sound and disposing mind and memory declare under oath
that "I disclaim all kind of civil, penal or administrative responsibilities of the Government
of the Province of Mendoza, the Department of Renewable Natural Resources and all the
concerned authorities, for any kind of accident, sickness and misfortune that I may have or
emergency that may arise during the arrival, exit and permanence in the Aconcagua
Provincial Park".
Likewise, I declare that I shall meet all expenses that may arise in case of rescue, air or land
track, evacuation by mule, helicopter or any other means of transport, medical expenses,
assistance and hospitalization, collaborators' contributions and theosts for the use or lost of
necessary rescue equipments.
Finally, I declare under oath that: I am aware of the applicable law and the difficulty and
risks involved with these activities at the Aconcagua Provincial Park. As a result, I
personally assume all my exclusive and absolute responsibility for the risks that this activity
involves for myself and my assets.
In agreement with what is being declared, I accordingly sign. In Mendoza, Argentina on the
of the year
Signature