

Chartwell Travel and Tours

RELEASE AND INDEMNITY

TO: Chartwell travel and tours and their respective directors, advisors, members, trustees, representatives, and officers and other related incorporated or unincorporated entities (collectively referred to as the "Indemnitees").

In consideration of the permission to participate with the Chartwell Travel and Tours in their tour to China and all activities related to such a tour to Asia, as organized by Chartwell Travel and Tours. I, the undersigned, do hereby release and forever discharge the Indemnitees and anyone or more of them from all liabilities, claims, demands, damages, actions, causes of action, suits, injuries, death, losses, costs and expenses, howsoever arising, of whatsoever nature, whether in contract or in tort or as a result of a fiduciary duty or by virtue of any statute which I or my heirs, trustees, executors, administrators, successors and assigns can, shall or may have arising out of or in consequence of my participation in the activities. Without limiting the generality of the foregoing, I further release any recourse which I may now or hereafter have resulting from any decision of the Indemnitees and any one or more of them.

This Release and Indemnity shall be binding upon me my heirs, trustees, executors, administrators, successors and assigns, and shall endure to the benefit of each of the Indemnitees and their respective heirs, trustees, executors, administrators, successors and assigns.

I and my next-of-kin are fully and duly aware of the risks and hazards inherent in such activities and are aware that participation could, in some circumstances, encounter risks and hazards due to natural or other causes, notwithstanding the above, I hereby voluntarily assume all loss, damage, injury or death to my person or property incurred while in or upon said premises or participating in said activities.

In signing this Release and Indemnity, I hereby acknowledge and represent that I have read, fully understand and agree to this Release and Indemnity, that I am in proper physical condition to participate in said activities.

Name (print): _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Tel: _____ Fax: _____ E-Mail: _____

Date: _____ Signature: _____