

Outdoor Activity Event Waiver and Release Form

Event Name: _____

Date: _____

Location: _____

Participant Information

Full Name

Date of Birth

 MM/DD/YYYY

Phone Number

Email

Emergency Contact Name & Phone

Assumption of Risk

I understand and acknowledge that participating in the outdoor activity may involve inherent risks, including but not limited to physical injury, illness, property loss, and even death. I voluntarily assume all risks associated with participation in this event.

Waiver and Release of Liability

In consideration for being permitted to participate, I hereby release, waive, indemnify, and hold harmless the event organizers, volunteers, sponsors, and all other related parties from any and all liability, claims, demands, or causes of action arising out of or related to my participation.

Medical Authorization

I authorize the event organizers to provide or arrange for medical treatment as they deem necessary in the event of injury or illness. I assume all responsibility for any costs related to such care.

Statement of Understanding

- I confirm that I am physically fit to participate.
- I will follow all safety instructions provided during the event.
- I am participating voluntarily and at my own risk.

Signatures

Participant Signature

Date

Parent/Guardian Signature (if under 18)

Date

By signing above, I acknowledge that I have read, understood, and agree to the terms and conditions of this waiver and release form.