

Travel Release of Liability Form

Participant Information

Full Name

Date of Birth

Phone Number

Email Address

Home Address

Travel Details

Destination(s)

Travel Dates

e.g. June 10, 2024 - June 20, 2024

Group / Organization Name (if any)

Emergency Contact

Name

Phone

Relationship

Release of Liability

I, the undersigned, acknowledge and understand that my participation in the above-described travel involves inherent risks. I hereby release and hold harmless the organizers, their agents, and affiliates from any and all

liability, claims, demands, actions, or causes of action, whatsoever arising out of any damage, loss or injury to me or my property while participating in the trip, whether such loss, damage, or injury results from negligence or any other cause.

I have read and agree to the terms stated above.

Signature

Participant Signature (Print Name)

Date

Parent/Guardian (if under 18 years)