

Adventure Activity Release of Liability

Participant Information

Full Name

Date

Age

Address

Release of Liability

In consideration of being permitted to participate in the adventure activities organized by *[Organization Name]*, I acknowledge and agree to the following:

- I understand that participation in adventure activities involves certain inherent risks, including but not limited to physical injury, property damage, or death.
- I voluntarily assume all risks associated with these activities.
- I hereby waive, release, and discharge *[Organization Name]*, its officers, employees, agents, and volunteers from any and all liability, claims, or demands resulting from my participation.
- I certify that I am physically fit and capable of participating safely in the activities.
- I agree to follow all safety instructions provided by the organizers and staff.

I have read and understood this Release of Liability and accept its terms.

Participant Signature

Date

Parent/Guardian Signature (if under 18)