

Outdoor Sports Event Waiver & Release of Liability

Event Name:

Date of Event:

Location:

Participant Name:

Date of Birth:

Emergency Contact Name:

Emergency Contact Phone:

Assumption of Risk

I acknowledge that participation in outdoor sports involves inherent risks, including but not limited to the risk of injury, illness, permanent disability, and even death. I voluntarily assume all risks associated with my participation in this event.

Release & Waiver

I hereby release, waive, and discharge the organizers, sponsors, volunteers, and all associated parties from any liability, claims, or demands arising from any loss, injury, or damage that may be sustained during my participation in this event.

Medical Authorization

In the event of accident or emergency, I authorize the event organizers to secure proper medical treatment for me as deemed necessary.

Participant Acknowledgment

I certify that I have read this waiver and fully understand its terms. I attest that I am physically fit and capable of participating in this event and have not been advised otherwise by a qualified medical professional.

Participant Signature

Date

If participant is under 18 years of age:

Parent/Guardian Signature

Date