

# Wildlife Safari Event Waiver Form

## Participant Information

Full Name

Age

Email Address

Phone Number

Emergency Contact Name & Number

## Waiver & Release

I understand that participation in the Wildlife Safari Event involves risks that could result in injury, property damage, or illness. I hereby release and hold harmless the event organizers, staff, and affiliates from any liability arising from my participation.

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I have carefully read and understood this waiver and voluntarily agree to its terms.

## Medical Information

Allergies / Medical Conditions

Current Medications

Signature

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Date

## For Participants Under 18

Parent/Guardian Name

Parent/Guardian Signature

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Date