

Corporate Team-Building Outing Waiver

Participant Information

Name:

Department:

Emergency Contact Name:

Emergency Contact Phone:

Waiver Agreement

I acknowledge and understand that participation in the corporate team-building outing involves inherent risks, including but not limited to physical activity, outdoor conditions, and group events. I voluntarily assume all risks associated with participation.

I release and discharge the company, its affiliates, officers, directors, and employees from all liability, claims, demands, or causes of action that may arise from participation in this event.

I confirm that I am physically able to participate in this activity and have disclosed any medical conditions that may affect my participation.

Medical Conditions / Allergies:

Signature:

Date:
