

Culinary Tour Liability Release

This Liability Release (â€œReleaseâ€) is executed by the undersigned participant in connection with participation in the culinary tour (â€œTourâ€) organized by:

Organizer Name:

Tour Date(s):

Participant Information

Full Name:

Email:

Phone Number:

Emergency Contact Name:

Emergency Contact Phone:

Assumption of Risk

I acknowledge and agree that participation in the Tour may involve risks, including but not limited to illness (including foodborne illness), food allergies, injury, or accident. I freely assume all such risks.

Release of Liability

I hereby release, waive, discharge, and covenant not to sue the Organizer, its employees, agents, and representatives from any and all liabilities, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained during or as a result of participation in the Tour.

Allergies & Medical Conditions

Please list known allergies or medical conditions:

Consent & Acknowledgement

By signing below, I confirm that I have read and understood this Release, and agree to its terms.

Participant Signature:

Date:
