Eco-Tourism Event Liability Waiver

This waiver of liability ("Waiverâ€) is executed by the participant named below in consideration of being permitted to participate in the eco-tourism event ("Eventâ€). By signing this Waiver, the participant acknowledges and agrees to the terms set forth herein.

Participant Information	
Name:	
Address:	
Phone Number:	
Email:	
Emergency Contact Name:	
Emergency Contact Phone Num	ber:
Assumption of Risk	
	the Event may involve outdoor and physical activities, travel over uneven which could result in injury or illness. I assume all risks associated with
Release and Waiver	
	Event organizers, sponsors, guides, volunteers, and affiliated entities from any lity arising from my participation in the Event, including but not limited to damage, or loss.
Medical Authorization	
	in medical treatment on my behalf in the event of an emergency if I am unable onsible for any medical expenses incurred.
Certification	
I certify that I am physically f	fit to participate in this Event and have read and understood this Waiver.
Signature:	
Date:	

Parent/Guardian Name:		
Parent/Guardian Signature:		
Date:		

If participant is under 18 years of age: