

# Wilderness Survival Camping Waiver

## Participant Information

Full Name

Date of Birth

Address

Phone Number

Email

## Emergency Contact

Contact Name

Contact Phone Number

Relationship

## Waiver and Release of Liability

I acknowledge that participating in wilderness survival camping involves inherent risks, including but not limited to exposure to harsh environments, injuries, and encounters with wildlife. I voluntarily assume all such risks and agree to hold harmless, release, and indemnify the organizers, instructors, and property owners from any and all claims, liability, or causes of action arising from my participation.

I certify that I am physically fit and have not been advised otherwise by a qualified medical professional. I acknowledge that I am responsible for my own health and safety throughout the event.

I understand and agree to comply with all instructions, safety guidelines, and applicable laws while participating in this event.

## Medical Information / Allergies

List any medical conditions, allergies, or medications:

## Signature

Participant Signature

Date

## For Participants Under 18

Parent/Guardian consent is required for participants under the age of 18.

Parent/Guardian Name

Parent/Guardian Signature

Date