

Spiritual Retreat Liability Waiver

By signing this form, I acknowledge and agree to the following terms and conditions related to my participation in the spiritual retreat:

- I understand that participation in retreat activities involves physical, emotional, and mental effort and risk.
- I voluntarily assume all risks associated with the retreat.
- I release the organizers and venue from any liability for injuries, losses, or damages incurred during the retreat.
- I agree to inform the organizers of any pre-existing medical conditions.
- I certify that I am physically and mentally fit to participate.

Participant Information

Full Name

Email Address

Date

Medical Information

Relevant Medical Conditions or Allergies

Emergency Contact Name & Phone



I have read, understood, and agree to all of the above statements.

Signature

Date
