Adventure Tour Participant Liability Waiver Form

Participant Information

Full Name
Age
Emergency Contact Name & Phone
Adventure Tour Details
Adventure rour Details
Tour Name
Date of Tour
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Assumption of Risk & Release of Liability
Lhouse read and understand the use iver and valuntarily agree to its terms
I have read and understand the waiver and voluntarily agree to its terms.
Participant Signature
Date
Parent/Guardian (if under 18)
Parent/Guardian Name
r alelib Gualdian Name
Parent/Guardian Signature
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Deta
Date