

Brief time	
Date	
Instructor	

RISK ACKNOWLEDGEMENT & DISCLAIMER

THIS IS AN IMPORTANT DOCUMENT: YOU MUST READ IT BEFORE SIGNING

1. I am 16+ years old and wish to undertake the Tree Top Adventure organised by Go Ape.
2. I understand that the Tree Top Adventure consists of a physically demanding aerial obstacle course and that there will be a risk of injury when undertaking it. For example, legs can be vulnerable to injury on zip wire landings.
3. To reduce the risks I agree to follow all the instructions set out in the Safety Rules that I have received with this document, along with all instructions to be given to me by Go Ape staff before and during the Tree Top Adventure.
4. If assuming responsibility for the supervision of any under 16 year olds in this agreement I declare that I am aged 18 years or older. In order to control behaviour supervisors must remain in visual contact of the children in their care for the duration of the activity.
5. I agree that I am responsible for any children in my care and undertake to ensure that he/she/they read, understand and will follow the instructions set out in the Safety Rules and oral instructions mentioned above.
6. I declare that if I am not their parent or guardian I have the authority of the parent or guardian to sign this risk acknowledgement and disclaimer.
7. In the event of an accident, or loss or damage to personal effects to myself or the children in my care, I acknowledge that Go Ape will not be liable for any direct or indirect loss, damage or injury arising from or in connection with the Tree Top Adventure (except death or personal injury caused by Go Ape's negligence) and I waive all and any claims against Go Ape in this respect both for myself and/or for the children in my care.
8. I certify that to the best of my knowledge neither I nor any children in my care have a medical condition which might make me or him/her/them more likely to sustain an injury. To the best of my knowledge I and any children in my care are not pregnant.
9. I confirm that I am not under the adverse influence of drink or drugs.

I acknowledge that I and the child(ren) in my care (if applicable) have received, read and understood a copy/copies of the Safety Rules in relation to the activity.

No.	Print name	Age	Signature of adult/supervisor	Staff use
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

SAMPLE

S
G
B+
13-15
10-12
TOTAL
CHECKED BY
ABORTS