



Liability Release Nature Foundation Sint Maarten

I, _____, (participant name) being over the age of eighteen (18) years old, or being a parent or guardian of any individual under the age of eighteen (18) acknowledge that I have voluntarily applied take part in this Nature Foundation Sint Maarten tour, project, activity and/or program. I acknowledge that I take part in this activity voluntarily. I recognize that I do not have to participate. I acknowledge that I have chosen to voluntarily take part in this activity.

I recognize that taking part in Nature Foundation Sint Maarten activities are inherently risky, and I expressly assume any and all risk of property damage, injury or death associated with this activity. In signing this waiver, I expressly assume the risks inherent in this activity.

_____ (Participant Initials- if participant is under 18 years old-Parent/Guardian Initials)

I hereby **voluntarily release, discharge, waive and relinquish** any and all actions or causes of action for personal injuries, known or unknown, and injuries to property, real or personal, and wrongful death **occurring** to me arising as a result of engaging or receiving instructions pertaining to these activities against the Nature Foundation St. Maarten, Nature Foundation's staff members and interns, the Dutch Caribbean Nature Alliance and all affiliates in any country, territory, or state, and any personnel associated with any of the above, including but not limited to employees, agents, independent contractors, team leaders and other volunteers. I absolve **the aforementioned parties of** any responsibility for my safety or any injuries or damages, which I may suffer during a Nature Foundation activity or any deviation from it. Where permitted to do so by applicable law, I further hold the aforementioned parties **harmless** for any and all negligent acts in any way related to Nature Foundation Sint Maarten activities. All photos and videos taken of me conducting Nature Foundation Sint Maarten activities can be shared and published on any public forums.

_____ (Participant Initials- if participant is under 18 years old-Parent or Guardian Initials)

Student Name: _____ Student Age: _____

Emergency Contact Name _____, Phone Number _____

Executed on _____, 20__ at _____ [city, country]

Participant Signature

(if under 18 years old- Parent or Guardian Signature): _____