



The Bear Grylls ADVENTURE

ALL PARTICIPANTS MUST BE AT LEAST 10 YEARS OLD TO TAKE PART IN SHOOTING AND DIVE. FOR ALL OTHER ACTIVITIES PARTICIPANTS MUST BE AT LEAST 8 YEARS OLD. WEIGHT, HEIGHT AND MEDICAL RESTRICTIONS APPLY.

High Ropes: Max – 20 stone, 6ft 7. Min 4.2 feet.

Climb: Max 21.5 stone

iFLY: Max 18 stone, 6.7 feet

THANK YOU FOR ACCEPTING THE TERMS AND CONDITIONS OF ENTRY AS PART OF THE REGISTRATION PROCESS. YOUR ACCEPTANCE OF THE WAIVER AGREEMENTS BELOW IS ALSO REQUIRED BEFORE YOU CAN PARTICIPATE IN THE ACTIVITY. PLEASE READ THIS DOCUMENT CAREFULLY BEFORE AGREEING TO ITS TERMS.

Name of participant: _____

Date of birth of participant: _____

Name of guardian completing form (if participant is younger than 16): _____

Post code: _____

Contact email: _____

Contact phone number: _____

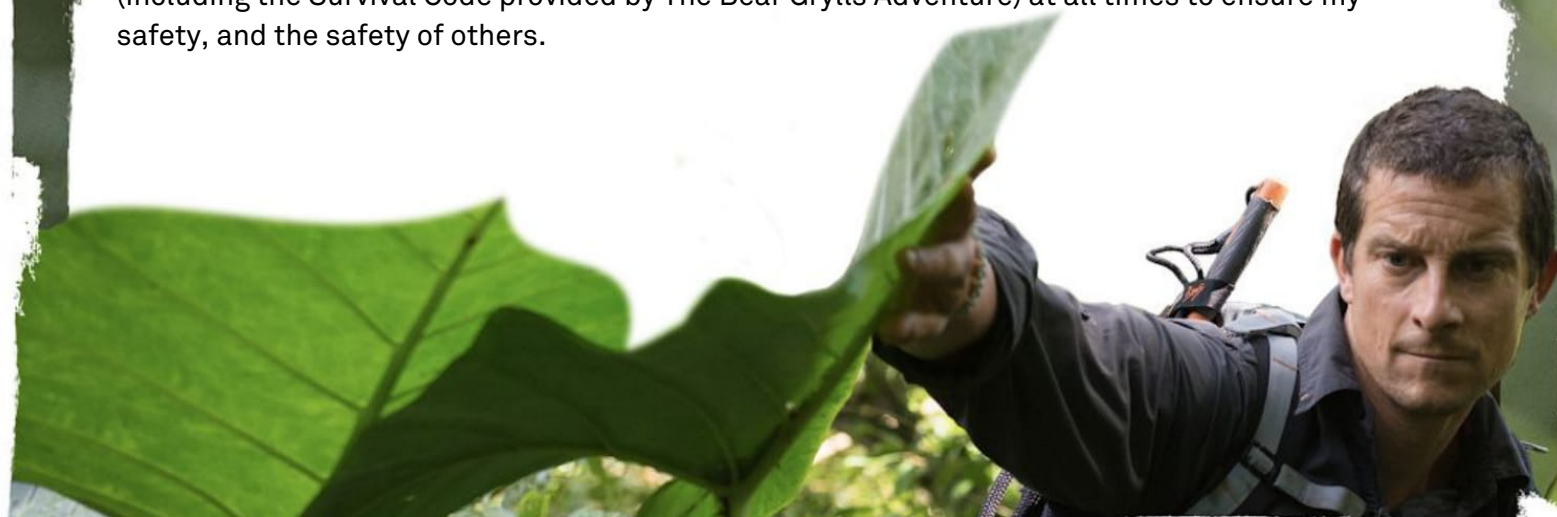
I am above the minimum age and comply with the weight and height restrictions noted at the start of this form. I acknowledge and agree that I am aware of the nature of the activity and have read the supporting information provided by The Bear Grylls Adventure of the inherent dangers and risks associated with the activity. Having understood the risks associated, I wish to participate in the activity organised by The Bear Grylls Adventure.

I understand that the activity has a significant potential for serious injury and that it is necessary to comply with the directions as noted in this waiver form at all times.

I am voluntarily participating in the activity with the knowledge of the dangers involved, and I agree to accept any and all risks of loss, injury or death.

I acknowledge that I must be present for and pay full attention to all safety briefings and that failure to attend or participate fully may lead to my engagement in the activity being cancelled without refund.

I will undertake the activity in accordance with all written and oral instructions given to me (including the Survival Code provided by The Bear Grylls Adventure) at all times to ensure my safety, and the safety of others.





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I am in proper and good health, and I am physically fit to learn and participate in the activity, and represent that I am not suffering from any disease which may put either myself or the participants in any risk or danger.

I certify that, to the best of my knowledge, I do not have a medical condition which may have the effect of making it more likely that I will be involved in an accident which could result in injury to myself or others. To the best of my knowledge, I am not pregnant. I confirm that I am not under the influence of alcohol or drugs. I agree to cease participation and notify staff at The Bear Grylls Adventure as soon as possible if I am concerned in any way about my ability to undertake the activity or the operation of the activity itself.

I understand that all clothing and safety equipment provided by The Bear Grylls Adventure is done so for my safety and that I will wear and properly fasten such clothing at all times when participating in the activity.

If assuming the responsibility for the supervision of any participants under 16 years old in this waiver form, I declare that I am aged 18 years or older.

If I am not the parent or guardian of any under 16 year olds included here, I declare that I have the authority of their parent or guardian to sign this waiver form.

I agree that I am responsible for my own safety and that of any under 16 year olds that I have assumed responsibility for in this waiver. I undertake to ensure that they have read, understand and will follow all written and oral instructions noted above, and that I will be present with them on the day.

In the event of an accident, loss, damage, injury or death, I acknowledge that The Bear Grylls Adventure will not be liable for any direct or indirect loss, damage or injury arising from or in connection with the activity (excluding death or personal injury caused by The Bear Grylls Adventure's negligence). I waive all and any claims against The Bear Grylls Adventure in this respect both for myself and for any minors in my care.

Signature: _____

Date: _____

