# LIABILITY WAIVER AND RELEASE FORM FOR MINORS PARTICIPATING IN OUTDOOR ACTIVITIES

## **Doodlebug Adventures Outdoor Activity Program**

Nature Exploration and Play for Kids

## Parent/Guardian Liability Waiver and Release of Claims

Please read carefully before signing.

### 1. Acknowledgment of Risk

I, the undersigned parent/legal guardian of [Child's Full Name], hereby acknowledge that participation in outdoor activities, including but not limited to nature exploration, hiking, and other play-based activities offered by Doodlebug Adventures, involves certain risks. I understand that these risks may include, but are not limited to:

- Slips, trips, or falls on uneven terrain
- Contact with plants, animals, and insects
- Weather conditions (heat, cold, rain, etc.)
- Injuries from participation in physical activities
- Potential exposure to allergens, such as pollen or bee stings

I fully acknowledge the inherent dangers and voluntarily agree to allow my child to participate.

#### 2. Assumption of Responsibility

I voluntarily assume all risks of injury, loss, or damage associated with my child's participation in these outdoor activities. I certify that my child is physically fit, is sufficiently for participation, and has not been advised to avoid such activities by a qualified medical professional.

#### 3. Waiver and Release of Liability

In consideration of my child's participation in Doodlebug Adventures outdoor activities, I, on behalf of myself, my heirs, executors, administrators, and assigns, hereby release and discharge Doodlebug Adventures, its directors, officers, employees, agents, and volunteers from any and all claims, demands, damages, costs, expenses, actions, and causes of action arising out of or in connection with any injury, damage, or loss sustained by my child as a result of their participation.

#### 4. Emergency Medical Treatment

In the event of an emergency, I consent to any medical treatment deemed necessary for my child's health and safety. I understand that I will be responsible for any medical costs incurred as a result of such treatment.

# 5. Photo/Video Release (Optional)

I give permission for Doodlebug Adventures to use any photos or videos taken of my child
during participation in outdoor activities for promotional purposes (e.g., brochures, website
social media). I understand that no compensation will be provided.

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## 6. Governing Law

This waiver and release shall be governed by the laws of the State of North Carolina, without regard to its conflict of law provisions.

## 7. Severability

If any portion of this waiver is held to be invalid, the remainder shall continue in full legal force and effect.

## 8. Parent/Guardian Signature

I have read and fully understand the terms of this Liability Waiver and Release Form. I agree to be bound by these terms and give my voluntary consent for my child to participate.

Parent/Guardian Full Name:	
Signature:	
Date:	
Child's Full Name:	
Child's Date of Birth:	
Emergency Contact Name:	
Emergency Contact Phone Number:	

## **Doodlebug Adventures Contact Information**

Karen Dixon – Program Director

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