



Skywalk Adventure - Disclaimer

This is a very important document so please read and understand before signing.

I understand that Skywalk Adventure consists of a **physically demanding aerial obstacle course** and participation entails known and unknown risks that could result in physical or emotional injury, paralysis or damage to myself and my property. I agree to accept and assume all the risks and elect to participate despite these.

To reduce any risks, I agree to undertake the activity **in accordance with all the instructions set** out in the safety rules that I received when booking along with all the instructions given to me by skywalk staff in the safety briefing.

Should an accident occur or loss/damage to any of my personal effects, Skywalk adventure would not be held liable and I acknowledge this means **I waiver any rights to claim in this respect**. This doesn't apply to death or any negligence on Skywalk Adventures part.

To the best of my knowledge, I can declare neither myself or anyone I'm responsible for **has a medical condition** that might affect the Skywalk experience, make them more likely to sustain injury or pregnant.

I am **not under the influence** of alcohol or drugs.

If responsible for any one else, please also read the below

When responsible for any persons under the age of 16, I can confirm I am over 18 and have the necessary permission to do so.

I agree that I am responsible for ensuring the children in my care fully understand all the safety rules issued to me when I booked as well as all the instructions given to me by Skywalk staff during the safety briefing.

PLEASE TURN OVERLEAF



Should an accident occur or loss/damage to any of the personal effects to anyone in my care, Skywalk adventure would not be held liable and I acknowledge this means I waiver any rights to claim in this respect on their behalf. This doesn't apply to death or any negligence on Skywalk Adventures part.

If you have any questions regarding any of the points listed in this document, please speak to a member of staff.

Personal declaration

Signed: _____

Print: _____

Date: _____

Signed on behalf of

Please enter the names of anyone you're assuming responsibility for

By signing, you confirm you have the relevant authorisation to act on their behalf

Name: _____ D.O.B: _____

Name: _____ D.O.B: _____