

High-Risk Activities Consent Form

Participant Name

First

Last

Activity Name

Emergency Contact Name

First

Last

Emergency Contact Phone

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Terms*

- I assume all responsibility for my own safety and well-being during the activity and agree to comply with all safety guidelines, instructions, and precautions provided by the organizers or supervisors. I acknowledge that I am participating in activities that may involve risk of injury or death. I understand the nature of these activities and voluntarily assume all risks associated with participation. I agree to hold harmless and indemnify the organizers, facilitators, and any associated parties from any liability for injury, death, or damages arising out of my participation.

I hereby assume full responsibility for my personal safety and well-being during this activity. I am resolutely committed to complying with all safety protocols, instructions, and precautionary measures delineated by the organizers and supervisors. I recognize that my participation involves inherent risks, including the possibility of injury or fatality. I fully understand these risks and voluntarily accept all liabilities associated with my involvement. Furthermore, I agree to indemnify and hold harmless the organizers, facilitators, and any affiliated parties from any claims arising from injury, death, or damages resulting from my participation. Additionally, I acknowledge that Bike Egypt is not liable for any medical expenses or travel-related costs, and I am responsible for obtaining travel Health insurance that adequately covers any medical or health issues that may arise during my journey.

Signature

The signature of the parent or legal guardian is required if the participant is under 18.



Date

 

Verification*

 I'm not a robot reCAPTCHA
Privacy - Terms

CONSENT

Never submit sensitive information such as passwords. [Report abuse](#)