



INDEMNITY FORM / CLIENT AGREEMENT FORM

TroopUp – Outbound Training, Adventure camps and Recreational activities

Event Name: Kid's Adventure Camp (08 to 14 years)

Date of event: 10th to 11th April 2026

PARTICIPANT INFORMATION

Full Name: _____

Age: _____

Address: _____

Phone Number: _____

Emergency Contact Name & Number: _____

Medical Conditions (if any): _____

DECLARATION OF RISK AND WAIVER OF LIABILITY

I, the undersigned, understand and acknowledge that participation in the above-mentioned outdoor trip involves inherent risks, including but not limited to:

- Slips, trips, and falls, adverse weather conditions, physical strain or injury, etc.

I certify that I or my ward is physically fit to participate in such activities and have not been advised otherwise by a qualified medical professional.

INDEMNITY CLAUSE

I hereby waive, release, and discharge, TroopUp, its founders, organizers and staff, and associated parties from any and all liability, claims, demands, actions, or causes of action arising out of or related to any loss, damage and injury that may occur during or as a result of participation in the above-mentioned event.

Participant Signature: _____

Parent/Guardian Signature (if under 18): _____

Date: _____, Place: _____

Please ensure this form is read, signed, and submitted prior to the event. Participants without a signed indemnity form will not be allowed to join the event. A scan copy of this form is also acceptable.