



INDEMNITY FORM / CLIENT AGREEMENT FORM

TroopUp – Military Training Bootcamps, Adventure camps and Recreational activities

Event Name: Outbound Training Camp (8-14 yrs)

Date of event: 7-8 Feb 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 Adventure camp involves inherent risks, including but not limited to:

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

I certify that my ward is physically fit to participate in such activities and has 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.

Parent/Guardian's Signature : _____

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 camp. A scan copy or a photo of signed form is also acceptable.