



**Wild To The Core, a brand of Wild Africa Experiences  
Indemnity & Consent 2022**

**General:-**

- I \_\_\_\_\_, the attendee, record that I have agreed to participate in the exercise and training sessions at my own risk. I understand that Pilates, Yoga and other Specialised Exercise forms are physically strenuous in nature and I record that I am in good health to participate.
- I hereby indemnify Wild Africa Experiences, its employees, authorised representatives, or agents against any and all claims, loss and/or damages caused- or arising from- any nature whatsoever. I accept full responsibility for any and all such damages, loss or claims which may arise by virtue of my participation in the sessions with Wild Africa Experiences of any nature and arising from whatsoever cause.
- I acknowledge that if I am uncomfortable with a specific activity, I can voluntarily withdraw from the activity but without the expectation of a refund.

**Medical:**

- I understand the need to be in good health to participate in physical activities, and do not hold the company responsible for any medical conditions that may arise.
- I understand that it is my own responsibility to consult a doctor before undertaking any physical activity, especially if I have pre-existing health considerations.
- I acknowledge that it is my own responsibility to inform Wild Africa Experiences of any pre-existing medical conditions that might have an influence on the safe participation in physical activities.
- I acknowledge that Wild Africa Experiences has the right to refuse participation, without a refund in the event that it considers it unsafe for any participant to take part if that participant is deemed unable to participate in a safe and effective manner.
- I acknowledge that if I am pregnant, a Doctor's note giving permission to exercise must be obtained in advance & given to Wild Africa Experiences prior to the event taking place

**I understand that:**

- No person shall be allowed to embark upon an activity unless and until, he or she is fully aware of and accepts this indemnity in favour of Wild Africa Experiences, it's owners, members, servants, agents or subcontractors, or any other associated party, and in the case of a minor, unless this indemnity has been accepted by the parent / guardian of such minor.

I hereby certify that I have read, understand and agree with all the details of this indemnity form and the Terms & Conditions of Wild Africa Experiences.

Full Name: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_

Date : \_\_\_\_\_