

**2021 Adult Participant Release for  
South Carolina Aquarium Offsite Activities**



I, \_\_\_\_\_, in consideration of the opportunity to participate in South Carolina Aquarium ["Aquarium"] Offsite Activities for the year 2021, agree to release and indemnify the Aquarium, its employees, officers, Board of Directors, and agents from any and all claims of any nature related to or arising out of any and all activities during any trip that may be made against any of them.

I also agree, consent to, and authorize the Aquarium to administer and seek necessary medical care that may be required for any injuries I sustain while participating in any activity, the expense for which I agree to be responsible.

I further represent that I do not have any physical or mental conditions that restrict or prevent me from participating in any activities. I have listed below my allergies and required medications that may entail special attention.

**Allergies:** \_\_\_\_\_

**Medication:** \_\_\_\_\_

In case of an emergency, please contact the following individual:

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

I hereby consent to the aforementioned representations pertaining to my participation in the South Carolina Aquarium's Offsite Activities for the year 2021.

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Printed Name of Participant	Signature of Participant	Date
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**Media Release:**

I agree that all photos and videos taken while participating in the Aquarium activity, in which I may appear, can be used for promotional purposes by the South Carolina Aquarium.

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Signature of Participant	Date
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