

## Superfun Hold Harmless Agreement

I (adult's name) \_\_\_\_\_ do hereby grant my permission to (student) \_\_\_\_\_ to participate in a Natural & Cultural History outdoor learning program offered by Deportes Superfun SpA. I understand that **Superfun does not provide any accident or medical insurance for my ward**. I understand that I am required to provide accident/medical insurance for him or her and do so under the policy listed below. I agree that I am financially responsible for any and all medical expenses associated with my ward participation in this program.

I understand that the activities associated with the programs include inherent risks of personal injury or harm. I understand that accidents may occur which could result in physical injury or harm to my ward. It is with the full understanding of the risks associated with these types of activities that my ward will participate in the program conducted by Superfun and I agree, on behalf of myself, to release, indemnify, and hold harmless, Deportes Superfun SpA and its from any and all liability, damages and claims of any nature arising out of or in any way related to my ward participation in a Deportes Superfun SpA activity. I understand that by signing this form I am voluntarily and knowingly accepting responsibility for my ward participation as a participant in a program conducted by Deportes Superfun SpA

Medical Insurance Provider: \_\_\_\_\_  
Policy No. \_\_\_\_\_

I understand that the terms of this agreement are legally binding and certify that I have signed this agreement on my own free will after carefully reading and fully understanding it.

Name (please print) \_\_\_\_\_

Ward name \_\_\_\_\_

Date \_\_\_\_\_

