

PERSONAL INFORMATION FORM

The information submitted in response to this form will be used for the sole purpose of providing Tide to Field with accurate information about your health and wellbeing, which may assist Tide to Field in creating an experience suited to your needs. You are under no obligation to disclose any of the following information.

Tide to Field will hold any information disclosed on this form as strictly confidential, to be used only for the limited purpose of informing Tide to Field about any specific needs you may have during activities organized and operated by Tide to Field. Tide to Field will not share any of the following information with anyone other than employees or agents duly authorized to act on behalf of Tide to Field.

Name:

Age:

Emergency Contact Name & Relationship to you:

Emergency Contact Phone Number:

Are there any limitations on your ability to participate in the Tide to Field activity that you have reserved?

Do you have any fears/concerns about the activities that you will be engaging in as part of the Tide to Field activity that you have reserved?

Do you have any food, plant, or medicinal allergies that Tide to Field should be aware of?

Do you have any medical conditions that Tide to Field should be aware of?