

Participant Waiver and Release of Liability

Poseidon Spiritual Healing Center: An Esoteric Fellowship

Acknowledgment of Risk

I, the undersigned participant (or parent/guardian if under 18), acknowledge that participation in outdoor activities offered by Poseidon Spiritual Healing Center: An Esoteric Fellowship (" the Center ") involves inherent risks. These activities may include, but are not limited to: camping, hiking, outdoor cooking, tool use (such as axes, knives, and fire equipment), physical exertion, wildlife exposure, weather conditions, transportation, and other outdoor or group activities. I understand that such activities carry potential risks of injury, illness, property damage, or in rare cases, death. I voluntarily choose to participate with full awareness of these risks and accept personal responsibility for my safety and well-being.

Assumption of Responsibility

I agree to act responsibly and follow all instructions, safety guidelines, and directions provided by the Center ' s staff, facilitators, and volunteers. I understand that failure to do so may increase risk and that I participate at my own discretion. I accept full responsibility for my actions and those of any minors under my supervision during this event.

Medical Disclosure and Consent

I affirm that I am physically and mentally able to participate in the retreat and its activities. I have disclosed any relevant medical conditions, allergies, or limitations to the Center. In the event of an emergency, I authorize the staff or its representatives to obtain or provide necessary medical treatment, and I agree to be financially responsible for any costs incurred.

Release and Waiver of Liability

In consideration for being permitted to participate in activities organized by Poseidon Spiritual Healing Center: An Esoteric Fellowship, I hereby release, waive, and discharge the Center, its owners, officers, staff, volunteers, affiliates, and property owners from any and all liability, claims, demands, or causes of action arising from my participation, including negligence, to the fullest extent permitted by law. This release applies to all activities connected to the retreat, including travel to and from the event location.

Property and Personal Belongings

I understand that I am responsible for my personal belongings and equipment. The Center is not liable for any loss, theft, or damage of personal items during the retreat.

Photography and Media Consent (Optional)

I grant permission to Poseidon Spiritual Healing Center: An Esoteric Fellowship to use photographs, video, or audio recordings taken during the retreat for promotional or educational purposes. I agree I do not agree

Agreement and Signature

I have read and fully understand this waiver and release of liability. I acknowledge that I am signing it voluntarily and that it shall be binding upon me, my heirs, assigns, and legal representatives.

Participant Name: _____

Signature: _____

Date: _____

Parent/Guardian (if under 18): _____

Signature: _____

Date: _____