



YOUNG ADVENTURES FISHING CHARTER INDEMNITY FORM

Participation Waiver and Assumption of Risk

Participant Full Name: _____

ID Number: _____

Parent/Guardian Full Name (if under 18): _____

Contact Number: _____

Email Address: _____

1. Acknowledgement of Risks

I, the undersigned, understand and acknowledge that participating in a fishing charter involves inherent risks, including but not limited to:

- Sudden weather changes
- Rough sea conditions
- Slipping, tripping, or falling
- Equipment-related injuries
- Motion sickness
- Interaction with marine life
- Accidental drowning or injury despite safety precautions

2. Medical Fitness

I certify that the participant is physically fit and has no known medical conditions that may impair their ability to take part safely in a fishing charter. Any relevant medical conditions or allergies have been disclosed below:

Medical Conditions / Allergies (if any):

3. Life Jackets and Safety

I acknowledge that life jackets will be provided and must be worn at all times when instructed by the skipper. All safety instructions given by the skipper or crew must be followed without exception.



4. Assumption of Liability

I agree to voluntarily assume full responsibility for any risk of injury, loss, or damage, including death, that may occur during participation in the fishing charter. I hereby waive and release Young Adventures, its owner(s), skipper, crew, agents, and affiliates from all liability or claims of any kind arising out of or related to participation in this activity.

5. Consent for Minors

As the parent/legal guardian of the minor named above, I consent to their participation and accept full responsibility for the minor's safety, actions, and well-being during the charter. I have explained the risks to the child in an age-appropriate way and confirm their willingness to participate.

6. Personal Property

I understand that Young Adventures is not responsible for any loss or damage to personal belongings brought on board during the fishing charter.

7. Photo/Video Release (Optional)

I give permission for Young Adventures to use any photos or videos taken during the trip for promotional purposes.

I do not give permission for the use of photos/videos of the participant.

Signed (Participant if 18+ or Parent/Guardian):

Signature: _____

Name: _____

Date: _____

Emergency Contact Name & Number:

Name: _____

Contact Number: _____