



# Release Form for Animal Experiences

I, \_\_\_\_\_, authorize myself and/or my child(ren) to participate in the Zoological Society of the Palm Beach, Inc.'s d/b/a The Palm Beach Zoo (the "Zoo") Visit.Feed.Learn. Animal Experience(s). I agree, assume and understand that participation in the Zoo's Visit.Feed.Learn. Animal Experience(s) and activity in all its forms may include "hazardous activities." These hazardous activities can include, but are not limited to, contact with wild animals, behind-the-scenes access and tours, animal encounters and recreational activities such as crafts and/or photo opportunities. Participation also includes the use of the Zoo facility, equipment, supplies and/or materials which are provided by the Zoo or are available at the Zoo which may also involve risks of injury.

I, on behalf of myself and my children, understand that it is my burden and obligation to ensure that each child participates with care and control at all times. In using the facilities of the Zoo and participating in these activities, on behalf of my children and myself, I understand and accept that hazards exist; assume the inherent risk that injury may result to myself or my children and agree to unconditionally and fully release the Palm Beach Zoo, its respective employees, volunteers, assigns and/or agents and representatives (collectively "the Zoo") from any and all past or future claims, demands, actions, causes of action, suits, or other liabilities of whatever kind, including, but not limited to, those arising out of the use of the Palm Beach Zoo its respective employees, assigns and/or agents and representatives' alleged negligence.

By signing this form, I acknowledge, on my own behalf and on behalf of each child designated below, that I am aware of each of the above circumstances and acknowledge their existence or potential and accept the risk attendant to these conditions, facts and circumstances and accept that certain hazards do exist and assume the inherent risk or injury may result there from. I acknowledge and understand on my own behalf and on behalf of each of my children identified herein that this release shall release the Zoo from all acts of negligence and any non-willful acts which have occurred or will occur in the future in connection with or relating to my use or my children's use or presence at the Zoo.

In the event of an accident, injury, illness or emergency, I give the Zoo permission to call 911 and to acquire emergency medical treatment and transportation on behalf of myself or my children. I understand that the Zoo does not assume any responsibility to take any of these actions. The Palm Beach Zoo will not administer, dispense or hold any medications. I give the Zoo permission to acquire emergency medical treatment if no parent or guardian or emergency contact can be reached.

The terms of this agreement may not be modified by any employee, representative, agent and/or assigns of the aforementioned companies. Participant agrees to be solely liable and save harmless Palm Beach Zoo, its respective employees, assigns and/or agents and representatives from liabilities, losses, injuries, damages or claims of any kind or nature arising out of his/her child's participation in zoo activities of any kind or nature. Participant hereby waives any and all rights of recovery arising as a matter of law or otherwise which you might now or hereafter have against Palm Beach Zoo, its respective employees, assigns and/or agents and representatives as set forth above.

I hereby release, discharge and agree to hold harmless and to authorize the Zoo to use any photograph pictures or portraits, video or other media for any reason whatsoever, including the use of any printed matter or other media (television, newspaper, Website, social media, internet) in conjunction with the Zoo.

Please list below any medical concerns or conditions including allergies which the Zoo staff needs to be aware of during your visit to the Zoological Society of the Palm Beaches, Inc.'s d/b/a the Palm Beach Zoo:

\_\_\_\_\_  
\_\_\_\_\_

Signature of Participant (if over 18 years of age): \_\_\_\_\_

Please Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Minor Participant (please print): \_\_\_\_\_ Age: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**A completed Release Form must be turned in prior to the start of any Animal Experience.**

**Failure to comply will result in your experience being cancelled and causing all funds paid to be unreturned.**

**Note: It is strongly recommended for participants in any Animal Experience to wear close-toed shoes at all times.**