

Undersigned (name):
 who lives at (address):
 E-Mail address:

I hereby declare and acknowledge that in the grounds of the adventure park I am using the rope courses, the equipments that are handed to me and other services of the adventure park operated by Sárvári Gyógyfürdő Kft. at my own risk and responsibility. After usage I immediately give the equipments back to the person in charge of operation.

Serial number of helmet	
Serial number of harness	

I hereby acknowledge that the services of the adventure park can only be used in accordance with the safety requirements stated in the house rules and only by those who possess the necessary physical and mental skills.

In case of injury in myself or in and other party the operator of the adventure park (Sárvári Gyógyfürdő Kft.) cannot be held responsible. Under the age of 18 this declaration becomes valid by the signature of the person that is entrusted by supervision, under the age of 16 the declaration must be signed exclusively by my guardian.

Sárvár,

Signature (own/guardian/supervisor)

Privacy notices:

By filling the declaration of responsibility, I acknowledge that my personal data will be processed by Sárvári Gyógyfürdő Kft. (9600 Sárvár, Vadkert utca 1.) in accordance with the applicable laws and the document entitled Privacy Notice and Process Description of Sárvári Gyógyfürdő Kft., which can be used with a declaration of responsibility.