Wildlife Madagascar Liability Release Form
Agreement of Understanding, Waiver, and Assumption of Risk

I, the undersigned, voluntarily choose to participate in research and activities at Wildlife Madagascar's field sites—La Mananara, Anjanaharibe-Sud Special Reserve, and Namoroka National Park—and understand that these activities involve inherent risks. These may include, but are not limited to:

- Exposure to wildlife, including potentially dangerous species such as mosquitoes and spiders.
- Difficult terrain, remote locations, and environmental conditions such as extreme weather.
- Travel by foot, vehicle, or other means in challenging and potentially hazardous environments.
- Risks of injury, illness, and property damage due to accidents, exposure to diseases, limited medical resources, or other circumstances beyond the control of Wildlife Madagascar.

Waiver of Liability
In consideration of my participation, I agree to the following:

1. **Release of Liability**: I, for myself, my heirs, executors, administrators, assigns, and representatives, hereby irrevocably waive, release, and discharge Wildlife Madagascar, its officers, directors, employees, agents, volunteers, partners, affiliates, and any associated entities from any and all liability for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter accrue to me from any cause whatsoever. This waiver includes, but is not limited to:
    - Risks associated with traveling to, from, or within Madagascar.
    - Risks occurring during my participation in research, field activities, or accommodations at or near Wildlife Madagascar sites.
2. **Assumption of Risk**: I voluntarily assume all risks related to my travel and activities.
3. **Health and Insurance**:
    - I certify that I have secured adequate health and travel insurance to cover any medical expenses, evacuation, or other emergencies that may arise during my stay in Madagascar.
    - I understand that Wildlife Madagascar does not provide insurance coverage or medical assistance beyond emergency protocols.
4. **Travel Risks**: I acknowledge the risks of international travel to and within Madagascar, including, but not limited to, delays, political unrest, transportation accidents, and exposure to diseases.
5. **Personal Responsibility**: I agree to abide by all safety protocols, rules, and instructions provided by Wildlife Madagascar staff, understanding that failure to do so may result in increased risks for which I am solely responsible.

Acknowledgment of Terms
I certify that:

- I have read and understood this release in its entirety.
- I have had the opportunity to ask questions and seek clarification about its terms.
- I sign this release voluntarily and with full knowledge of its legal consequences.

Participant's Name (Printed): _____
Participant's Signature: _____
Date: _____

Chief Conservation Officer Name (Printed): _____
Chief Conservation Officer Signature: _____
Date: _____