

CONSENT AND WAIVER OF CLAIM LETTER



Office of Uganda's Ambassador
for Women and Girls

[January 7, 2024]

Dear [Participant's full name]

Re: Participation Consent and Waiver of Claim - Re-Connecting with Nature in Africa Expedition

We are delighted that you have expressed interest in joining the Re-Connecting with Nature Expedition. Before embarking on this transformative journey, it is essential to outline the terms of participation to ensure a safe and enriching experience for all involved.

Participant Information: Full Name: [Participant's Full Name] Date of Birth: [Participant's Date of Birth] Address: [Participant's Address] Contact Number: [Participant's Contact Number] Email Address: [Participant's Email Address]

Expedition Details: Expedition Name: Re-Connecting with Nature in Africa Expedition

Duration: 2 weeks

Consent to Participate: I, the undersigned, willingly consent to participate in the Re-Connecting with Nature Expedition organized by the Office of Uganda's Ambassador for Women and Girls. I understand that the expedition aims to address emotional toll and mental well-being in humanitarian work through experiential climate action reality TV.

Acknowledgment of Risks: I acknowledge that participation in the expedition involves exposure to various environments and activities that may pose inherent risks, including, but not limited to, physical exertion, unpredictable weather conditions, and encounters with local wildlife. I am aware that the expedition may also involve emotionally challenging situations related to humanitarian work.

Health and Well-being: I affirm that I am in good health and physically capable of participating in the expedition. I understand the importance of disclosing any medical conditions, allergies, or dietary restrictions that may impact my participation, and I have provided accurate information on the application form.

Consent to Filming and Photography: I grant permission for the Office of Uganda's Ambassador for Women and Girls and its affiliates to capture, use, and reproduce my likeness, voice, and activities during the expedition for promotional and educational purposes.

Waiver of Claim: In consideration of being permitted to participate in the Re-Connecting with Nature in Africa Expedition, I hereby waive any and all claims, liabilities, and demands against the Office of Uganda's Ambassador for Women and Girls, its staff, volunteers, sponsors, and any associated partners for personal injury, property damage, or any other loss that may arise during or as a result of my participation in the expedition.

Emergency Medical Treatment Authorization: In the event of a medical emergency, I authorize the Office of Uganda's Ambassador for Women and Girls to seek and administer necessary medical treatment on my behalf.

Agreement to Abide by Rules and Guidelines: I agree to abide by all rules, guidelines, and instructions provided by the Office of Uganda's Ambassador for Women and Girls throughout the duration of the expedition.

I have read and understand the terms outlined in this letter, and I willingly agree to participate in the Re-Connecting with Nature in Africa Expedition under these conditions.

Participant's Full Name: _____ Participant's Signature: _____

Date: _____

Next of Kin Full Name: _____ Signature: _____ Date: _____

Parent/Guardian Signature (if participant is under 18): _____ Date: _____

Wilson Jaga

Chief of Party

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