This form is to be completed by all participants of the “Meet The Penguins” experience before participating in the experience. In the event that any participant of the experience is 17 years old or under, the parent or legal guardian of that participant will be required to complete this declaration on that participant’s behalf.

1. I will obey the instructions and safety rules of my guide at all times pre, during and post experience.
2. I will not interfere with my guide’s ability to run the experience in a safe and secure manner.
3. I will ensure any child in my party is kept under my supervision at all times.
4. I will ensure [myself / my child] keep all protective clothing on at all times.
5. I will highlight to my guide if I become any way concerned about the safety of the experience.
6. I understand that if [I / my child] do not comply with this declaration that [I / my child] will be removed from the experience without a rebooking or refund.

By signing this document you are declaring that you understand the experience and that you have had the chance to discuss the activity with your guide.

I agree to accept any and all risks associated with the Experience and agree and acknowledge that London Aquarium (South Bank) Limited (registered number 06553877) trading as SEA LIFE London and its related bodies corporate and their employees and agents, shall not be liable (to the extent permissible by law) for any loss, damage or injury arising from or connected with the Experience no matter how that loss, damage or injury is caused, including if it is caused by any pre-existing medical, physical or psychological condition.

Name of participant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parent / Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact phone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship mother / father / legal guardian (please circle)

I acknowledge and agree that I have read and understood the terms and conditions relating to the

Experience and [my child and I] have been informed of the safety rules relating to the experience

and agree [to/that my child may] participate in the experience.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_