

! Please read attentively !

Statement
for accompanying persons/ mentors of underage persons

- Please fill out clearly and in block letters -

Accompanying person/ mentor:

First + last name: _____

Postal address: _____

@-Mail: _____

Phone or mobile No.: _____

female male

Date of birth: _____

Today,

on _____
(Date)

I am the accompanying person/ mentor of the following underage person/s (max. 5 underage persons) at Hochseilgarten Isarwinkel high ropes course + zipline „Flying Fox“ in Lenggries:

	First Name:	Last name:	Date of birth:
Underage person 1			
Underage person 2			
Underage person 3			
Underage person 4			
Underage person 5			

PLEASE TURN OVER !

! Please read attentively !

As...

- ...mother
- ...father
- ...person authorized by the parents

...I explicitly assume the absolute parental supervision for the above mentioned underage person/s during the whole stay in the „High ropes course Isarwinkel“ and Zipline „Flying Fox“.

I am aware that there is no constant supervision by any member of the staff after the safety instruction and that I am solely responsible for the above underage person/s to obey the safety rules/ instructions of the high ropes course. Further more I am aware of the instructions/guidelines of „High ropes course Isarwinkel“ and zipline „Flying Fox“. I take care that the underage person/s I accompany obey these instructions/ guidelines. I solely take care that the underage person/s is/are constantly and sufficiently supervised, checked and kept under surveillance and for this I take full responsibility.

How did you hear about us? (please check where applicable)

- internet
- friends/ family/ job
- advertisement (leaflet, newspaper article, etc.)
- gift voucher _____
- radio advertisement (radio station) _____
- Other _____

Place	Date	Signature of the person authorized by the parents