



Cultured Travel Medical Release Form

As stated in the release form, all participants are to be responsible for their own medical needs and Cultured Travel, LLC (subsequently referred to as Cultured) has no obligation to obtain any medical care for any participants on any trip or tours. Participants must be able to administer any medications they require and maintain possession of such medications at all times. Cultured may not be held responsible or liable for any medications or treatments for participants. Cultured will do its best to accommodate (and does not guarantee the ability to accommodate) any dietary needs when informed of the needs of a participant in advance. If dietary needs of a participant are not provided in advance or not provided clearly, it may be impossible to accommodate such needs at meal time while on tour. Cultured Travel programs and trips do not include attending medical personnel. Please fill out the following information clearly and concisely and sign the acknowledgement portion of this form below.

Participant Name:

Emergency Contact Name and Phone Number:

Allergies, dietary restrictions, special needs, pre-existing medical conditions, or other important medical information:

*It is advised that participants have copies of any prescriptions with them while on tour. It is also advised that participants have a record of all medications they are on (prescription or over-the-counter) in case of emergencies.

*All participants are expected to have a form of medical coverage applicable to the region of travel. It is understood that Cultured assumes no risk or liability involving medical costs a participant may incur.

Name: _____ (printed) _____ (signature)

Date: _____