

Waiver & Release of Liability Form

Fearless AllStars

Class Tumble Birthday Cheer Private Dance

Date: _____

I HEREBY assume all of the risks of participating and/or volunteering in this activity or event, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently prepared or trained for participation in the activities or event, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity or event.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors and organizers of the activity or event in which I may participate, and that it will govern my actions and responsibilities at said activity or event.

In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns follows:

- (a) I waive, release, and discharge from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my personal injury, property damage, property theft or actions of any kind which may hereafter occur to me including my travelling to and from this event, the following entities or persons: FAS and/or their directors, officers, employees, volunteers, representatives, and agents, the activity or event holders, activity or event sponsors. Activity or event volunteers;
- (b) I indemnify, hold harmless and promise not to sue the entities or persons mentioned in this paragraph from any and all liabilities and claims made as a result of participation in this activity or event, whether caused by the negligence of release or otherwise.
- (c) I acknowledge that FAS and their directors, officers, volunteers, representatives, and agents are NOT responsible for errors, omissions, acts, or failures to act of any part or entity conducting a specific event or activity on behalf of FAS.

I acknowledge that this activity or event may involve a test of a person’s physical limits and may carry with it potential serious injury. The risks may include, but are not limited to, those caused by facilities, temperature, weather, condition of participants, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event. These risks are not only inherent to participants, but are also present for volunteers.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity or event.

I understand that at this event or related activities, I may be photographed; I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers, and assigns.

The accident waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Print Participant’s Name

Age

Signature (if under 18, Parent or Legal Guardian)

Date