

B.A.S.E. Fitness, Inc.

WAIVER AND RELEASE OF LIABILITY

READ BEFORE SIGNING

In consideration of being allowed to participate in any way in the B.A.S.E. Fitness Inc. athletics/sports/Dance/Parkour/ Martial Arts programs or related events and activities,

I \_\_\_\_\_ (Print of participant), the undersigned acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation ; and,
3. I fully understand that any pre existing conditions concerning health, injury or other concerns which may prohibit my involvement, must be disclosed prior to participation. Any restrictions, adaptation, precautions or modification of the activities needed for the participant is solely the responsibility of the participant. ; and,
4. I willingly agree to comply with the stated customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately ; and,
5. I, for myself and on the behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS B.A.S.E. Fitness Inc. their officers, officials and/ or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owner and leasers of premises used to conduct the event ( "Releasees " ) , WITH THE RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH ,or loss or damage to person or property, WHETHER ARISING FROM NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I HAVE READ THIS WAIVER AND RELEASE OF LIABILITY AND ASSUMPTIONS OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT , AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

\_\_\_\_\_ (Print name of participant) Age: \_\_\_\_\_ Date Signed: \_\_\_\_\_

Participant's Phone Number \_\_\_\_\_

Name and number of emergency contact \_\_\_\_\_

FOR PARTICIPANTS OF MINORITY AGE

(UNDER AGE 18 AT THE TIME OF REGISTRATION PLEASE READ AND SIGN THE ATTACHED)

MINORITY WAIVER AND RELEASE ATTACHMENT

This is to certify that I, as a parent / guardian with legal responsibility for this participant, do consent and agree to his/her release as provide above of all the releases, and , for myself, my heirs, assigns, and next of kin , I release and agree to indemnify and hold harmless the releases from any and all liabilities incident to my minors child's involvement or participation in these programs as provided above , EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

X \_\_\_\_\_  
(Parent or Guardian's Signature) EMERGENCY PHONE # (s) \_\_\_\_\_

Date Signed: \_\_\_\_\_ E-mail \_\_\_\_\_

I also understand that video and or photography may be used at anytime and that the use, distribution, publishing or dispersing of those materials is the right of the sponsor, advertiser, agencies or owner: \_\_\_\_\_ (initials)

Mailing Address:

Street Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_