

# General Liability Waiver Form

This General Liability Waiver ("Waiver") is executed on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by the undersigned participant or legal guardian ("Participant"), in favor of [Organization Name], its directors, officers, employees, volunteers, and affiliates (â€œReleased Partiesâ€).

## 1. Waiver and Release

I acknowledge that my participation in activities organized by [Organization Name] involves risks that may result in physical or emotional injury, permanent disability, illness, or death, as well as property loss or damage. I voluntarily assume all such risks.

I hereby release and hold harmless the Released Parties from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, injury, or damage that may be sustained while participating in said activities, whether caused by the negligence of the Released Parties or otherwise.

## 2. Medical Treatment

I consent to receive any medical treatment deemed advisable during participation. I agree to cover all costs associated with medical care.

## 3. Acknowledgement of Understanding

I have read this waiver and fully understand its terms. I acknowledge that I am signing this agreement freely and voluntarily.

Participantâ€™s Name

Date

Signature

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If under 18, Parent/Guardian Name

Parent/Guardian Signature

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Date

[Organization Name] — [Contact Information]

