

Athletic Event Liability Release

This Liability Release ("Release") is executed on this _____ day of _____, 20____, by the undersigned participant ("Participant") in connection with participation in the following event:

Event Name: _____

Date: _____

Location: _____

Assumption of Risk

I acknowledge and understand that participation in athletic events involves inherent risks, including, but not limited to, bodily injury, illness, disability, or death. I voluntarily assume all such risks associated with my participation in this event.

Release and Waiver

In consideration for being permitted to participate, I hereby release, discharge, and hold harmless the event organizers, sponsors, volunteers, and affiliated entities from any and all liability, claims, demands, or causes of action that may arise from my participation, whether caused by negligence or otherwise.

Medical Authorization

I authorize event personnel to seek medical treatment on my behalf if I am injured or otherwise in need of medical attention. I understand that I am responsible for any resulting medical expenses.

Acknowledgement

I certify that I am physically fit to participate in this event. I have read, understand, and voluntarily sign this Release. This Release shall be binding upon me and my heirs, assigns, and legal representatives.

Participant's Signature

Date

Parent/Guardian Signature (if under 18)

Date

Please print and complete this form prior to attending the event.