

Group Event Participation Liability Waiver

Event Name: _____

Date: _____

I, the undersigned participant, acknowledge that my participation in this event is voluntary. I agree to assume all risks associated with my involvement, including any and all personal injury or property damage that may occur.

I, for myself, my heirs, executors, administrators, and assigns, hereby release and hold harmless the organizers, sponsors, volunteers, and affiliates of this event from any and all liabilities, claims, or demands arising from my participation.

I certify that I am physically fit to participate and will abide by all event rules. I grant permission for medical treatment if necessary during my participation.

I have read and fully understand this waiver and agree to its terms by signing below.

Participant Name:

Signature: Date:

For participants under 18: A parent or guardian must sign below.

Parent/Guardian Name:

Signature: Date: