

Participant Assumption of Risk Waiver

This Assumption of Risk Waiver ("Waiver") is entered into by the undersigned participant ("Participant") in connection with participation in the event/show ("Event") organized by _____ (Organizer).

Assumption of Risk

I acknowledge, understand, and accept that participation in the Event involves inherent risks, including but not limited to physical injury, property damage, or other hazards. I hereby voluntarily assume all risks associated with my participation.

Release and Waiver

In consideration for being permitted to participate in the Event, I hereby release and discharge the Organizer, its officers, directors, employees, agents, volunteers, and affiliates from any and all claims, liabilities, damages, or causes of action arising from my participation in the Event.

Medical Treatment

I consent to receive medical treatment deemed advisable in the event of injury or illness during my participation in the Event and agree to be responsible for any costs incurred as a result.

Certification

I certify that I am physically fit and capable of participating in the Event and agree to abide by all Event rules and safety guidelines.

Participant Name (Print):

Signature:

Date:

If Participant is under 18, Parent/Guardian Name (Print):

Parent/Guardian Signature:

Date:
