

Fuzion Athletics Minnesota

Fuzion Athletics Minnesota, LLC and Fuzion Athletics, Inc. Release of Liability, Waiver of Claims, Assumption of Risk and Indemnity Agreement And Consent to Electronic Image

Participant's Name _____ Birthdate _____ / _____ / _____

Parent Name _____ Phone # _____

Address _____ City _____ State _____ Zip Code _____

Emergency Contact _____ Relationship _____ Phone # _____

WARNING! CATASTROPHIC INJURY, PARALYSIS OR EVEN DEATH CAN RESULT FROM THE IMPROPER CONDUCT OF THE ACTIVITY

INHERENT RISKS OF INJURY: Track & Field events and their related competitions and training, including pole vaulting, will cause the participant to encounter inherent risks and hazards that may result in serious injury or death. These risks and hazards include, without limitation, falls, muscle and skeletal injury from running and jumping, and other related activity.

ASSUMPTION OF RISK: I acknowledge for myself and/or for my minor child that I understand, agree and accept the inherent risks, hazards and dangers associated with the sport of Track & Field, including pole vaulting, and their related competitions and training, and I understand that my participation and/or that of my minor child may result in serious injury or death. I hereby release Fuzion Athletics Minnesota and Fuzion Athletics, Inc. for myself and/ or my minor child from any and all liability for personal injury as a result of participating in the sports of track & field and their related competitions and training. This release includes a release of all negligent acts of Fuzion Athletics Minnesota and or Fuzion Athletics, Inc. and any of its employees, independent contractors, agents, and all persons associated with them. This Assumption of Risk and Release of Liability is given in return for the privilege of using the facilities and premises of Fuzion Athletics Minnesota and or Fuzion Athletics, Inc. which is agreed to be adequate consideration. I give my permission to Fuzion Athletics Minnesota and Fuzion Athletics, Inc. and/or appropriate medical facility to make whatever emergency (first aid, etc.) measures as judged necessary for the care and protection of myself or my child. Any medical transportation will be at my own expense. It is understood that in some medical situations, the staff will need to contact the local emergency resource before the parent, physician and/or other acting on behalf of the parent or family can be reached.

POLE VAULT HELMET USE: The Minnesota State High School League (MSHSL) requires the use of helmets by participants in the pole vault for high school competition and practice. Fuzion Athletics Minnesota and Fuzion Athletics Inc. do NOT require the use of helmets. By signing this agreement I acknowledge for myself (as a participant) and/or for my minor child (as a participant), that the utilization of a helmet is my decision and that any consequences of wearing or not wearing a helmet fall under the ASSUMPTION OF RISK clause above and the HOLD HARMLESS AND INDEMNIFICATION AGREEMENT clause below.

HOLD HARMLESS AND INDEMNIFICATION AGREEMENT: Each parent or guardian signing this agreement on behalf of themselves or any minor child in his/her charge agrees to indemnify and hold harmless Fuzion Athletics Minnesota and Fuzion Athletics, Inc. for any claims made or damages awarded against Fuzion Athletics Minnesota and or Fuzion Athletics, Inc. in favor of the parent or guardian, or the minor child, including attorney's fees and costs relating to the claims asserted by the parent or guardian, or minor child.

CONCENT TO PHOTOGRAPH AND MEDIA RELEASE: I understand that photograph or video may be taken during the course of class instruction, during a special event at Fuzion Athletics Minnesota and or Fuzion Athletics, Inc. or at a function sanctioned by Fuzion Athletics Minnesota and or Fuzion Athletics Inc. I hereby grant permission to Fuzion Athletics Minnesota and Fuzion Athletics, Inc. to use photograph or likeness in any publicity or promotional publications. (e.g., web site, newspaper ads, bulletin boards, newsletters, programs, brochures, public broadcasting releases, etc.) and to allow the news media to film and/or photograph programs and activities for broadcast purposes of me or my minor child.

Participant Signature _____ Date _____

Parent/Guardian Signature _____ Date _____
(Required if participant is under 18 years of)

Email address _____
Fuzion Athletics, Inc. will neither sell nor share you email address. Email addresses will be used for communication purposes only