**Waiver Form**

# AUTHORIZATION AND RELEASE OF ALL CLAIMS

It is expressly agreed that participation in the All-American Wrestling Club shall be undertaken by the parent/guardian at his or her risk. It is further agreed that All-American Wrestling Club shall not be liable for any injuries or damages to the participant, nor the subject of any claim, injury, or damages, whatsoever, including but not limited to, damages resulting from act of active or passive negligence on the All-American Wrestling Club, its coaches or its officers or agents. Initials: \_\_\_\_\_

It is specifically agreed that Fuquay Sports Center & All-American Wrestling Club shall not be responsible or liable to the parent/guardian or participant for articles lost or stolen in the training center.  Fuquay Sports Center, & All-American Wrestling club shall not be responsible or liable for loss or damage to any other property of parent/guardian or All-American Wrestling Club participant including their automobile and contents thereof. Initials: \_\_\_\_\_

It is also agreed that any damages to the training center’s facilities (Fuquay Sports Center) or property or property of any parent/guardian or All-American Wrestling Club participant by any other parent/guardian or All-American Wrestling Club participant, is the sole responsibility of the offending parent/guardian or All-American Wrestling Club participant. I have identified all medical problems that All-American Wrestling Club should be aware of and have provided all special instructions on the Registration Form and Emergency Contact section. I understand that photographic, video and/or other images of my child may be obtained and used in the media, on the All-American Wrestling Club, website, or in other All-American Wrestling Club, promotional and publicity materials at the discretion of All-American Wrestling Club, and that if I do not wish for my child's image to be used for these purposes I must request so in writing. Initials: \_\_\_\_\_

If I am signing on behalf of a minor child, I also give full permission for any person connected with All-American Wrestling Club, to administer first aid deemed necessary, and in case of serious illness or injury, I give permission to call for medical and or surgical care for the child and to transport the child to a medical facility deemed necessary for the well-being of the child. Initials: \_\_\_\_\_\_

***Indemnification:***  The parent/guardian of the participant recognizes that there is risk involved in the types of activities offered by All-American Wrestling Club.  Therefore, the parent/guardian of the participant accepts financial responsibility for any injury that the participant may cause either to him/herself or to any other participant due to his/her negligence. Should the above-mentioned parties, or anyone acting on their behalf, be required to incur attorney’s fees and costs to enforce this agreement, I agree to reimburse them for such fees and costs. I further agree to indemnify and hold harmless All-American Wrestling Club, their principals, agents, employees, and volunteers from liability for the injury or death of any person(s) and damage to property that may result from my negligent or intentional act or omission while participating in activities offered by All-American Wrestling Club, at Fuquay Sports Center or abroad. This includes but is not limited to parks, recreational areas, playgrounds, areas adjacent to main building, and/or any area selected for training by All-American Wrestling Club. Initials: \_\_\_\_\_

I have read and understood the foregoing assumption of risk and release of liability, and I understand that by signing it obligates me to indemnify the parties named for any liability for injury or death of any person and damage to property caused by my negligent or intentional act or omission.

Initials: \_\_\_\_\_

I understand that by signing this form I am waiving valuable legal rights. I certify that I am the managing conservator of this child or children, am authorized to sign this waiver, and accept the terms of this Agreement.

Initials: \_\_\_\_\_

I expressly agree that this release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted by the laws of the State of North Carolina. This release is an agreement between the parties. This agreement and the terms of this release are contractual and not a mere recital. Initials: \_\_\_\_\_

I give permission for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to participate in the All-American Wrestling Club.

Signature of Parent(s)/Guardian(s): Mother: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Father: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Names: Mother: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Father:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Reviewed By (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_