

Tamika's School of Epicure Waiver and Release of Liability

Release of Liability, Waiver of Claims, Assumption of Risk, and Indemnity Agreement PLEASE READ CAREFULLY, BY SIGNING THIS DOCUMENT, YOU CHOOSE TO WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE.

- The risk of injuries resulting from tripping or falling over obstacles.
- The risk of other injuries resulting from participating in any action in the program or event.

I recognize and fully understand that the above list is not a complete or exhaustive list of all possible risks; the list only provides examples of types of risks that I am assuming.

I hereby agree to the conditions below. I fully intend and choose to give up the legal rights, as stated below:

- 1. TO WAIVE ANY AND ALL CLAIMS that I have or may have in the future against the Tamika's School of Epicure, its directors, employees, agents, or representatives.
- 2. TO RELEASE THE Tamika's School of Epicure from any and all liability for any loss, damage, injury, expense, or other cost that I may suffer or that my next of kin may suffer in connection with my participation in this event.
- 3. TO HOLD HARMLESS AND INDEMNIFY THE Tamika's School of Epicure from all liability to property, or personal injury to, any third party, resulting from my participation in this program/event.
- 4. That I am over the age of 18 or have a parent or guardian's consent and that I am responsible and will adhere to all the rules on the Tamika's School of Epicure property.
- 5. That this Waiver, Release, and Agreement is fully effective and shall be effective and binding upon me, and my heirs, next of kin, executors, administrators, and assigns, or anyone else authorized to act on my behalf or on behalf of my estate.

I have read and understood this document. I am aware that by signing this document, I am waiving certain legal rights that I may have against Tamika's School of Epicure, and I fully agree to do so.

Childs' name:	
Child's Date of birth:	
Parent or Guardian signature: Print:	
Date:	