1080 MOTION LIABILITY WAIVER & RELEASE FORM

Participant Agreement, Release and Assumption of Risk

This is a legal document. Please read carefully before signing.

Client Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1. Acknowledgment of Risks**

I, the undersigned, understand that participation in training and performance sessions using the 1080 Motion system involves physical activity and may include, but is not limited to: sprinting, resistance training, high-speed movements, and other strenuous activity. I understand that these activities carry risks of injury, including but not limited to: muscle strain, ligament injury, cardiovascular events, paralysis, or death.

I confirm that I am in good physical condition and have no medical condition or impairment that would prevent my safe use of the equipment.

**2. Voluntary Participation**

I voluntarily agree to participate in training using the 1080 Motion under the supervision of a certified coach/trainer. I understand that my participation is completely voluntary, and I may stop at any time.

**3. Assumption of Risk**

I knowingly and freely assume all risks, both known and unknown, associated with the use of the 1080 Motion. I take full responsibility for any injury, illness, damage, or loss that may result from my participation, whether caused by the negligence of staff, equipment failure, or otherwise.

**4. Release and Waiver of Liability**

I hereby release, waive, and discharge the coach, staff, facility, and any affiliated entities from any and all liability, claims, demands, or causes of action that may arise from my use of the 1080 Motion, whether in training, competition, or demonstration, regardless of fault.

This release includes, without limitation, any liability for personal injury, death, or property damage.

**5. Indemnification**

I agree to indemnify and hold harmless the trainer, coach, facility, and all related parties from any claims, demands, or expenses arising out of my participation or use of the 1080 Motion.

**6. Medical Authorization**

In the event of injury, I authorize the staff to seek emergency medical treatment on my behalf. I assume all financial responsibility for any treatment rendered.

**7. Media Release (Optional)**

☐ I grant permission for photos/videos taken during training to be used for promotional, instructional, or marketing purposes.

☐ I do NOT grant permission for media use.

**8. Governing Law**

This Agreement shall be governed by and interpreted in accordance with the laws of the state in which the training takes place.

I HAVE READ AND UNDERSTAND THIS RELEASE OF LIABILITY AGREEMENT. I SIGN IT VOLUNTARILY AND WITHOUT INDUCEMENT.

Signature of Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature (if under 18): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_