**J.U.M.P. Smart LLC**

**Training/Track and Field**

**Release of Liability Waiver**

**Participant Name:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Emergency Contact Name:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Contact Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In consideration of being permitted to participate in track and field training activities organized by J.U.M.P. Smart LLC, I, the undersigned, hereby agree to the following terms and conditions:

1. **Assumption of Risk:** I acknowledge and understand that participation in track and field activities, including but not limited to running, jumping, throwing, and other physical exercises, carries inherent risks. These risks may result in injury, illness, or even death, and I voluntarily assume all risks associated with participation in these activities.
2. **Release of Liability:** I, on behalf of myself, my heirs, executors, administrators, and assigns, hereby release, waive, discharge, and covenant not to sue J.U.M.P. Smart LLC, its directors, officers, employees, agents, volunteers, and representatives (collectively, "Releasees") from any and all liability for any injury, loss, or damage, including but not limited to personal injury, property damage, or death, arising out of or related to my participation in the track and field training activities, whether caused by the negligence of the Releasees or otherwise.
3. **Indemnification:** I agree to indemnify, defend, and hold harmless J.U.M.P. Smart LLC and the Releasees from all claims, demands, lawsuits, or other legal actions, including reasonable attorney’s fees, arising out of my participation in the training activities.
4. **Medical Authorization:** In the event of an emergency or injury during participation, I authorize J.U.M.P. Smart LLC and its representatives to seek emergency medical treatment on my behalf, at my sole cost and expense, and I agree to accept full responsibility for any resulting medical charges.
5. **Acknowledgment of Physical Condition:** I represent that I am in good physical condition and do not suffer from any medical condition that would impair my ability to safely participate in track and field activities. If I am unsure about my physical condition, I agree to consult with a physician before engaging in any activity.
6. **Media Release:** I grant permission for J.U.M.P. Smart LLC to use photographs, videos, or other media recordings of my participation in training activities for promotional or educational purposes without compensation.
7. **Severability:** If any portion of this waiver is deemed invalid or unenforceable, the remaining provisions shall remain in full force and effect.

**By signing below, I acknowledge that I have read and understood the terms and conditions of this waiver. I am voluntarily and knowingly consenting to participating in the track and field activities, and I accept the associated risks.**

**Participant Signature:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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