



PARENTAL / PARTICIPANT CONSENT, RELEASE FROM LIABILITY AND INDEMNITY AGREEMENT

PLEASE READ: This is a legal document which, if signed, will have the effect of rendering you and, if applicable, your child unable to bring any type of action against the Mansfield SportsPlex, or any officers or employees of same for incidents occurring on the premises at 31 Oxford Road, Mansfield, Massachusetts, event sponsor, donor, or any of its agents, because of any harm you, or if applicable, your minor child, may suffer as a result of participation in any activity while on the premises.

I, _____, for myself and / or as parent(s) of
_____, minor(s),

group I am here with is _____,

(if applicable), do hereby consent to my / his / her participation in activities, both passive and active, at the BUSINESS and all activities associated with it, and hereby forever RELEASE, discharge, and covenant to hold harmless the BUSINESS and appointed employees, owners, vendors, leasers or agents (including but not limited to sponsors, suppliers and advertisers), insurers, attorneys, servants, affiliates, and their successors and assigns from any and all manner of actions and causes of action, agreements, judgments, settlements, damages, claims, and demands whatsoever, known or unknown, at law or in equity, on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damage which I may now, or hereafter have as a participant or parent of said minor participating, and also all manner of actions and causes of action, agreements, judgments, settlements, damages, claims, and demands whatsoever, known or unknown, at law or in equity, which either I or said minor has or hereafter may acquire, either before or after he/she has reached his/her majority, resulting from his/her participation in this voluntary program.

I acknowledge that I enter into this Agreement after having had ample opportunity to consult with counsel, and I do so knowingly and voluntarily, with complete understanding of the terms and the conditions of the Agreement. I recognize that any form of exercise or athletic endeavor carries risk, including the danger of impact and injury to the musculoskeletal system (sprains and strains) and the cardio respiratory system (dizziness, shortness of breath). I hereby certify that I know of no medical problems other than noted and disclosed that would increase my risk of illness or injury as a result of participation in any exercise program.

Member / Guest: _____ Date: _____ / _____ / _____
(if under 18 years of age, signature of parent or legal guardian required)

Printed Name Relationship email address

One waiver form per family – all participants must be individually listed on waiver.