

RIS3 Waiver / Acknowledgement of Risk

Parent/Guardian Consent Form:

Please read carefully and sign your agreement below.

Acknowledgement of Risk:

- I have voluntarily chosen to allow my child to attend a Ris3 Event and understand the risks involved.
- I acknowledge that the events and its activities may involve certain risks to my child, including but not limited to property damage or loss, minor bodily injury, severe bodily injury, and death.
- Furthermore, I recognize that my child's participation in the Ris3 Events involves activities incidental thereto, including but not limited to, limited availability of medical aid and the consequences of possible reckless conduct of other participants. By voluntarily allowing my child to participate in the Ris3 Event with the knowledge of the risks involved, I hereby acknowledge all inherent risks of property damage, bodily injury, or death to my child.

Hold Harmless:

- In consideration of allowing my child to participate in the Ris3 Event and to the fullest extent permitted by law, I agree to hold harmless Ris3 Athletic Academy, its trustees, officers, directors, employees, agents, volunteers and assigns from and against all claims arising out of or resulting from my child's participation in the Ris3 Event, unless caused by the sole negligence or willful misconduct of Ris3 Athletic Academy, its trustees, officers, directors, employees, agents, or volunteers.
- "Claim" as used in this agreement means any financial loss, claim, suit, action, damage, or expense, including but not limited to attorney's fees, attributable to bodily injury, sickness, disease or death, or injury to or destruction of tangible property including loss of use resulting there from. In addition, I hereby voluntarily hold harmless Ris3 Athletic Academy, its trustees, officers, directors, employees, agents, volunteers or assigns from any and all claims, both present and future, that may be made by my child, me, my family, estate, heirs or assigns, unless caused by the sole negligence or willful misconduct of Ris3 Athletic Academy, its trustees, officers, employees, agents, or volunteers.

Consent to Arrange Emergency Treatment:

- I understand and acknowledge that on rare occasions an emergency may develop which necessitates the need for emergency medical care, dental care, hospitalization or surgery for my child. Therefore, in event of injury or illness to my child which necessitates emergency care, I hereby authorize Ris3 Athletic Academy, and its staff, to arrange any necessary emergency care.

Permission to Use Photography or Likeness:

- I hereby give my permission to Ris3 Athletic Academy to use my child's photographic image, in whole or in part, for promotional and marketing activities at the discretion of Ris3 Athletic Academy.

Parent/Guardian Signature: _____ Date: _____

Print Name: _____