



RELEASE AND WAIVER OF LIABILITY

In consideration of being permitted to participate in any program including, but not limited to gymnastics, tumbling, parkour, jiu jitsu, etc. at Airborne Gymnastic Academy, LLC (including Shark Tank Brazilian Jiu Jitsu and Airborne Movement), related events, activities, and all other sanctioned gym events, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in **all programs** at **Airborne Gymnastics Academy, LLC (The "Academy")** is significant, including the potential for permanent injury to me (or my child/children) does exist; and
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my (or my child's/children's) participation; and if I have significant concern in my (or my child's/children's) for my readiness for participation and/or in any program or activity, I will remove myself (or my child/children) from participation and bring such to the attention of the nearest official immediately; and
3. I, for myself (or my child/children) and on behalf of my/our heirs, assigns, personal representatives, and next of kin, HEARBY RELEASE: The Academy, its members, officials, agents, employees, coaches, volunteers, and/or other participants, sanctioned events, sanctioned judges, to conduct the event (Collectively, the "Releasees") WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to mt involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. I, for myself (or my child/children) and on behalf of my/our heirs, assigns, personal representatives, and next of kin, HEARBY INDEMNIFY AND HOLD HARMLESS all of the above Releasees from any and all liabilities incident to my (or my child's/children's) involvement or participation in these programs, EVEN IF ARISING FROM NEGLIGENCE to the fullest extent permitted by law.
6. Photo/Video Release: I, for myself (or my child/children) and on behalf of my/our heirs, assigns, personal representatives, and next of kin, grant permission to use my (or my child's/children's) likenesses in photographs/videos in all types of publications and advertisements including, but not limited to, The Academy printed and digital publications and social media.
7. The Academy strongly recommends all participants consult with their physician prior to beginning any physical program. By engaging in physical activities at The Academy you (and/or your child/children) agree that you (and/or your child/children) do so at your (and/or your child's/children's) own risk, are voluntarily participating in these activities, assume all risk of injury to yourself (and/or your child/children), and agree to release and discharge The Academy from any and all claims or causes of action, known or unknown, arising out of use of The Academy's facilities.
8. Assumption of Risk and Waiver of Liability Relating to Coronavirus/COVID-19:
The Academy cannot guarantee that you (and/or your child/children) and/or members of your family/household will not become infected with COVID-19 during or after participation of activities at our facility. I acknowledge that attending activities at our location could increase your (and/or your child's/children's) and members of your family's/household's risk of contracting COVID-19. By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that myself, my family/household, and/or my child/children may be exposed to or infected by COVID-19 by entering The Academy or attending activities in our facility, and that such exposure or infection is by no fault of The Academy. I acknowledge that such exposure or infection may result in personal injury, illness, permanent disability, and/or death.

I UNDERSTAND I AM ASSUMING ALL RISKS ASSOCIATED WITH ALL ACTIVITIES AND PROGRAMS AT AIRBORNE GYMNASTICS ACADEMY, LLC, WHETHER KNOWN OR UNKNOWN, AND THAT BY SIGNING THIS DOCUMENT I AM GIVING UP MY RIGHT TO SUE THE ACADEMY WHETHER CAUSED BY NEGLIGENCE OF SAID PERSONS OR ENTITIES.

I VOLUNTARILY SIGN MY NAME EVIDENCING MY ACCEPTANCE OF THE ABOVE PROVISIONS WITHOUT RESERVATION and further agree that no oral representations, statements, or inducements apart from this agreement have been made.

I WANT MYSELF (AND/OR MY CHILD/CHILDREN) TO PARTICIPATE IN THE HAZARDOUS ACTIVITES/SPORTS AT AIRBORNE GYMNASTICS ACADEMY, LLC.

I HAVE READ THIS DOCUMENT IN ITS ENTIRETY. I UNDERSTAND IT IS A RELEASE OF ALL CLAIMS.

Parent/Legal Guardian/Adult Participant
Printed Name

Date

Parent/Legal Guardian/Adult Participant
Signature

Telephone Number

Participants:

Street Address

Participant Name #1

Date of Birth

City, Zip

Participant Name #2

Date of Birth

Email

Participant Name #3

Date of Birth