

ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN OR ATTENDING ANY AND ALL ACTIVITIES ORGANIZED UNDER THE GOSHIN NINJUTSU RYU BY THE OPEN CHURCH FOR PHILOSOPHY AND SPIRITUALITY (OCPS), including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by the organisers, their partners or affiliates, or because of their possible liability without fault. I certify that I am physically fit and have not been advised to not participate, by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in these activities.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the organisers, their partners or affiliates and that it will govern my actions and responsibilities at said activities. In consideration of my application and permitting me to participate in these activities, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter occur to me including my traveling to and from these activities;

(B) I INDEMNIFY, HOLD HARMLESS, AND WILL NOT SUE the entity and/or persons organizing these activities and waive them from any and all liabilities or claims made as a result of participation in these activities, whether caused by the negligence of release or otherwise. I acknowledge that these activities may test a person's physical and mental limits and may carry with it the potential for death, serious injury and property damage or property loss. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, any officials and monitors, and/or producers/organisers of the activities and lack of hydration. These risks are not only inherent to participants, but are also present for volunteers.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during these activities.

I understand that at these activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the organisers, their partners or affiliates.

The accident waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Participant Name: _____

Participant Signature: _____

Signature of Witness, Parent or Guardian: _____

Name and Signature of Organiser: _____

Date: _____