## **Waiver and Release**

- I am the parent and/or legally authorized guardian of the child participating in the 512 Outlaw Wrestling program. On behalf of myself, my spouse, my child/ward (the "Participant"), my heirs and next of kin, personal representative, agents, insurers, successors and assigns (all hereinafter "Releasors") hereby forever release, discharge and covenant not to sue 512 Outlaw Wrestling, or any successor or predecessor business entity or wrestling club, the board of directors, the officer and/or members of 512 Outlaw Wrestling, the coaches, volunteers of 512 Outlaw Wrestling nor their insurers, their affiliated or controlled legal entities or clubs, administrators, agents, TX-USA Wrestling, committees, volunteers, all employees of USA Wrestling, and any and all participants, officials, referees, coaches, host clubs, guest clinicians, sponsoring agencies, sponsors, advertisers, local organizing committees and owners, lessors and operators of premises used to conduct any wrestling event, meet, practice or activity (all hereinafter "Releasees") from any and all liabilities, claims, demands, causes of action or losses of any kind or nature, past, present or future, direct or consequential that I may hereafter have for PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, arising out of my participation in, attendance at or traveling to and from any wrestling event or activity including, but not limited to, LOSSES CAUSED BY THE PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.
- Releasor understands and acknowledges that wrestling activities and the sport of wrestling in general have inherent dangers that no amount of care, caution, training, instruction, supervision or expertise can eliminate. RELEASOR EXPRESSLY AND VOLUNTARILY ASSUMES ALL RISK OF PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, sustained while participating in, attending, preparing for or traveling to and from any wrestling event, meet, practice or activity, including the risk of PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.
- Releasor acknowledges and fully understands that each participant in any wrestling event, meet, practice or activity, including Releasor, will be engaging in activities that involve risk of serious injury, including permanent, temporary, total or partial disability, disfigurement, paralysis and any other losses to person or property, including death, and that severe social and economic losses may result not only from releasor's own action, inactions or negligence, but also from the actions, inactions or negligence of others notwithstanding the rules of play or the condition of the premises or of any equipment used. Further Releasor acknowledges and fully understands that there may be other associated risks with such activities which are not known or not reasonably foreseeable at this time.
- For the avoidance of doubt, Releasor acknowledges and fully understands that this release, discharge and covenant not to sue explicitly includes, but is not limited to, all losses and damages of any kind arising out of Releasor's presence, or the presence of those accompanying Releasor, on the property of 512 Outlaw Training Center, Collier 609, LLC, 512 Outlaw Wrestling, the officer/members of 512 Outlaw Wrestling, the coaches of 512 Outlaw Wrestling, or on the property of any entity affiliated with or controlled by 512 Outlaw Wrestling, the officer/members of 512 Outlaw Wrestling the coaches, volunteer, administrators, officers, board members of 512 Outlaw Wrestling even when such losses or damages are not directly related to the dangers inherent in wrestling.
- Video/Photo Release: I hereby give permission for images of the participant, captured during the 512 Outlaw Wrestling program listed through video, photo and digital means, to be used solely for the purposes of 512 Outlaw Wrestling promotional material and publications, and waive any rights of compensation or ownership thereto.

I ACKNOWLEDGE THAT I HAVE HAD SUFFICIENT OPPORTUNITY TO REVIEW THE PROVISIONS OF THIS DOCUMENT AND UNDERSTAND ITS PURPOSE, MEANING AND INTENT.

## CHECK ONLY ONE BOX

| I hereby represent that I am, in fact, the parent or legal guar such capacity agree to the terms and conditions of the above |   | and acting in       |
|--|---|---------------------|
| I hereby represent that I am the participant, 18 years or older waiver and release.  | r, in such capacity agree to the terms and conditions | of the above stated |
| Signature of parent, legal guardian, or adult participant  | Date  |                     |
| Print Name   | Relationship to participant                           |                     |
| Phone number   | <br>Email   |                     |

## **COVID 19 Participation Consent Form**

Participant (if 18yrs old or above) or a parent/guardian of participant knowingly and willingly consent to participate in wrestling practices and/or private sessions at 512 Outlaw Wrestling Training Center.

I understand that the COVID 19 virus has a long incubation period which carriers of the virus may not show symptoms and still be contagious. I also understand that it is impossible for 512 Outlaw Wrestling and its coaches, instructors, officers, directors, board members, administrators, volunteers, or employees to determine who may or may not have the virus.

There is a risk of contracting the virus by participating in wrestling and, with this knowledge, I agree to assume this risk for my wrestler(s), myself and anyone else who we come in contact with that may subsequently contract the virus as a result of our participating in practices and events held at or in conjunction with 512 Outlaw Wrestling Training Center.

Specifically, I agree to hold harmless 512 Outlaw Wrestling, coaches, instructors, officers, directors, administrators, volunteers and all other individuals, organizations, sponsors, promoters, operators, instructors, associations, schools, officials, and other participants connected with the event from all losses, damages, injuries, causes of actions, claims, or complaints in the event that the participant becomes sick in any way during the participantion, instruction and/or performance of any exercise or during any activity associated with the location.

I further agree to strictly obey coaches and instructors and observe safety rules, including but not limited to, taking participant temperature prior to participation in practice, using disinfectant wipe, washing hands with anti-bacterial soap or using hand sanitizer before and after practice and showering as soon as possible after practice.

I confirm that participant(s), myself and anyone who I bring into the facility is not presenting with any of the following COVID 19 symptoms listed below:

- Fever (temperature above 100.4)
- Shortness of Breath
- Dry Cough
- Runny Nose
- Sore Throat
- Reduced/Altered Taste

I also confirm that my wrestler(s), myself and family members in our household have not been exposed to anyone both exhibiting symptoms of COVID 19, as well as anyone who has been diagnosed with COVID 19 in the last 14 days. If you do exhibit symptoms or are diagnosed, please contact 512 Outlaw Wrestling immediately.

I ACKNOWLEDGE THAT I HAVE HAD SUFFICIENT OPPORTUNITY TO REVIEW THE PROVISIONS OF THIS DOCUMENT AND UNDERSTAND ITS PURPOSE, MEANING AND INTENT.

## CHECK ONLY ONE BOX

| I hereby represent that I am, in fact, the parent or legal acting in such capacity agree to the terms and condition |  | 10 |
|---|--|----|
| ☐ I hereby represent that I am the participant, 18 years o above stated waiver and release.                         | r older, in such capacity agree to the terms and conditions of t | he |
| Signature of parent, legal guardian, or adult participant   | Date   |    |
| Print Name  | Relationship to participant                                      |    |
| Phone number  | Email  |    |