



## PARTICIPANT-WAIVER

Visit Date(s): \_\_\_\_\_

Player Name \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone(\_\_\_\_) \_\_\_\_\_ Parent's E-mail \_\_\_\_\_

I understand that Frozen Ropes is not responsible for any medical or hospital fees or costs associated with the illness or treatment of myself or my child. I agree to indemnify Frozen Ropes for any and all expenses related to the treatment of my child. The responsibility of Frozen Ropes is strictly limited. Frozen Ropes and its employees are not responsible for the willful or negligent acts and/ or omissions of any supplier of services, including, but not limited to, airline carriers, transportation services, hotels, and sports facilities.

By agreeing to allow my child to participate in activities at Frozen Ropes, I agree that Frozen Ropes shall not be liable for any accident, injury, illness, death, property damage, real or personal loss to my child in connection with any accommodations, transportation, or sports-related services, or resulting directly or indirectly from any occurrences beyond the control of Frozen Ropes, including, but not limited to, criminal, willful, or negligent acts of others, defects in vehicles, breakdown in equipment, strikes, theft, delay or cancellation, or change in itinerary or schedules. I assume all the foregoing risk and accept personal responsibility for any and all damages resulting from injury, permanent disability or death: and/ or damage to any personal or real property. I release, waive, discharge and covenant not to sue Frozen Ropes, its administrators, directors, agents, coaches, and other employees of the organization, other participants, sponsors, advertisers, and owners or leasers of premises used to conduct the event, all of which are hereinafter referred to as "releases," from any and all liability to each of the undersigned, his or her heirs and next of kin or any and all claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releases or otherwise.

I understand that Frozen Ropes has the right, in its sole discretion, to discontinue my child's participation in the Frozen Ropes Camp for any violations of its rules and regulations, or for any actions that may be detrimental to the safety and well-being of the other participants. In the event this occurs, there shall be no refund from any unused portion of the activity.

I have read and understood this Participation-Waiver, and give my consent by signing below:

\_\_\_\_\_

Name of Parent/Legal Guardian Signature Date

**\*ALL participants must have signed waiver to participate in any activities at Frozen Ropes!**