

Participant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Emergency Contact (Relationship): \_\_\_\_\_ Phone \_\_\_\_\_  
Physician's Name: \_\_\_\_\_ Phone \_\_\_\_\_  
Medical Conditions (asthma, allergies, injuries, etc) : \_\_\_\_\_  
Sports Played/Activities: \_\_\_\_\_ School (if applicable): \_\_\_\_\_  
Referred By: \_\_\_\_\_

**HOLD HARMLESS RELEASE FORM**

In consideration of being allowed to enter into the Teamworks Sports Performance (TSP) facility and participate in sports performance programs, as well as related events and activities, the undersigned acknowledges, appreciates and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I further acknowledge and agree that in choosing to enter into and use the Teamworks facility, and engage in the activities, I recognize and accept that because the Teamworks facility is open for use by many other individuals, I am at a higher risk of exposure to and/or contracting COVID-19 or other diseases such as influenza or Legionnaires Disease; and,
5. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, and assume full responsibility for all such risks; and,
6. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Teamworks/ Indoor Sports LLC and any or all affiliated or subsidiary entities, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property; and,
7. In the event that a claim is brought by Participant or Releasee against the other, the defendant shall be able to recover reasonable attorneys' fees if incurred in successfully defending against such claim.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

- I also,
- Declare myself to be physically sound and suffering from no condition, impairment, disease, infirmity or other illness that would prevent my participation or use of equipment or machinery. I acknowledge that I have either had a physical examination and have been given my physician's permission to participate, or that I have decided to participate in the exercise activities, programs and use of equipment without the approval of my physician and do hereby assume all responsibility for my participation in said activities, programs and use of equipment.
  - Understand that TSP regularly takes pictures and video during our programs that are used for promotional materials, websites, social media, etc. and give permission to TSP to use these pictures and video without compensation.

**PARTICIPANT (over 18):** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**IF PARTICIPANT IS UNDER 18 YEARS OF AGE, PLEASE FILL OUT THE FOLLOWING:**

Parent/Guardian's Name: \_\_\_\_\_  
Address (if different from above): \_\_\_\_\_  
Email (if different) : \_\_\_\_\_ Telephone #: (if different): \_\_\_\_\_

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above.

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date Signed**