

Accident Waiver and Release of Liability Form

I hereby assume all of the risks of participating in any/all activities organized by [Organization Name], including but not limited to, any accidents, injuries, or loss of property. I certify that I am physically fit and have not been advised otherwise by a qualified medical professional.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the organizers, sponsors, and affiliates of the activity, and that it will govern my actions and responsibilities at said activity.

In consideration for being permitted to participate, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

- 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, the following entities or persons: [Organization Name], and their directors, officers, employees, volunteers, representatives, and agents.
- Indemnify, hold harmless, and promise not to sue the entities or persons mentioned above from any and all liabilities or claims made as a result of participation in any activities.

Participant's Name:

Signature:

Date: