



Eagle Fencing Club
ASSUMPTION OF RISK, RELEASE OF LIABILITY AND CONSENT

Fencer's Name (please print): _____

Assumption of Risk: I understand and appreciate that participation in the sport of fencing carries a risk of serious injuries, including permanently disabling injuries and death. I acknowledge that I have been reasonably advised and/or otherwise know, understand, and appreciate the inherent risks of participation in Eagle Fencing Club's fencing and athletic activities and of using its facilities and/or equipment. By executing this document, **I knowingly accept and assume** these risks and assert that I am voluntarily participating in such activities despite knowing of such risks.

Release of Claims: In consideration of my participation in the classes and activities of Eagle Fencing Club, and use of its facilities and equipment, on behalf of myself, my heirs, personal representatives and assigns, **I hereby release** Eagle Fencing Club along with its owners, employees, instructors, coaches, volunteers, and agents, from any liability for any injury, loss of life, negligence, property loss or damage, or other loss or damage occurring as a result of my participation in Eagle Fencing Club's classes, events, demonstrations, competitions, or other activities, or as a result of the facilities or equipment that may have been provided to me for those activities.

I willingly agree to comply with stated and customary terms and conditions for participation in this sport. If I observe any unusual or unnecessary hazard during my presence or participation at any Eagle Fencing Club activity, I will immediately bring such to the attention of the nearest Eagle Fencing Club representative or other person in charge.

Consent for Medical Treatment: I further give my consent to Eagle Fencing Club and its representatives to provide first aid and/or obtain medical care, treatment, and emergency medical services from any licensed physician, hospital, or clinic for the above-named athlete for any injuries or illnesses that could arise during activities associated with fencing classes and activities of Eagle Fencing Club. I affirm heretofore that the above-named athlete is in good physical condition and that I am not aware of any disease, injury or condition that would result in injury by participation in fencing and associated training activities.

I represent and understand, by signing below, that I have read this document, fully understand it, and freely and voluntarily sign the same, and that I am acting for myself, my heirs, personal representatives, and assigns.

Fencer's Signature: _____ Date: _____

Address: _____

Phone Number: _____ E-mail: _____

FOR FENCERS LESS THAN EIGHTEEN YEARS OLD, A PARENT OR LEGAL GUARDIAN MUST ALSO SIGN BELOW:

As a parent/guardian, I have explained to this fencer the aforementioned conditions and their ramifications. I consent to the fencer's participation in the activities of the Eagle Fencing Club and agree to and join in the terms and conditions of the assumption, release, agreement and consent set henceforth above.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Name (please print): _____

USE OF IMAGES AND NAME IDENTIFICATION:

I authorize Eagle Fencing Club to use images of me and/or my child both with and/or without identification for Eagle Fencing Club publicity, promotional and advertising purposes and release any and all claims and/or rights I and/or my child might have as a result.

Signature of Fencer: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____
(for fencers under age 18)