

INSURANCE & MEDICAL COVERAGE WAIVER AGREEMENT

iHEARTSPORTS, LLC does NOT provide health and accidental insurance coverage for events, activities, camps and/or games. Any participant or employee must rely on their parent/guardian or personal medical insurance plan for payment of all medical services in the event of an injury that requires medical attention.

WAIVER/CERFIFICATION: In signing this waiver form, I release iHEARTSPORTS, LLC and all of their employees and independent contractors from any claims or responsibility for injuries suffered in any activities or events conducted by iHEARTSPORTS, LLC that occur within or outside of the rented facility. I knowingly assume all risks associated with participation, even if arising from negligence of the participants or others, and assume full responsibility for participation. I certify that myself or my child is in good physical condition and can participate in sports related activities and I understand that activities conducted include inherent risks that cannot be avoided regardless of the care taken iHEARTSPORTS, LLC. I also agree to hold harmless, defend and indemnify iHEARTSPORTS, LLC including damages awarded, investigation costs, attorney's fees and related expenses from any and all claims arising from my or my child's participation in any activities. I further agree to hold harmless, defend and indemnify iHEARTSPORTS, LLC against any and all claims of co-participants, rescuers, and others arising from the conduct of the participant in activities. If an emergency arises, I authorize the staff of iHEARTSPORTS, LLC to request and/or administer medical treatment to myself or my child, if necessary.

SCOPE: I understand this agreement applies to personal injury, including death, from incidents or illness arising from participation in iHEARTSPORTS, LLC activities including but not limited to practice; competitive games; events; organized or individual training/conditioning activities; tests; camp/clinics or individual instruction; use of facilities, equipment, locker room areas, and all premises, or attendance at such activities whether or not as a participant, including the associated sidewalks and parking lots, and to any and all claims resulting from the damage to, loss of, or theft of property in activities conducted by iHEARTSPORTS, LLC. I understand that this entire agreement between iHEARTSPORTS, LLC and myself regarding waiver and acceptance of risk cannot be modified or changed in any way by representations or statements by any agent or employee of iHEARTSPORTS, LLC.

ACKNOWLEDGEMENT: I have read and understand this agreement and aware that I am giving up substantial rights, including the right of the participant or child to sue for damages in the event of death, injury, or loss. I acknowledge that I am voluntarily signing the agreement, and intend my signature to be a complete release of all liability, including that due to ordinary negligence by the protected parties, to the greatest extent allowed by the law. In addition, I authorize iHEARTSPORTS, LLC to utilize any and all photographs, pictures or other likenesses of myself or my child for promotional purposes only. All payments, including deposits, are non-refundable.

Name of Participant (If participant is a minor, parent/guardian mus	Signature or Participant st sign below)
Name of Parent/Guardian	Signature of Parent/Guardian
Name of Health Provider	Provider #
<u>EIV</u>	IERGENCY CONTACT INFORMATION
Name	Phone#
Name	Phone#