



**PARTICIPANT RELEASE OF LIABILITY  
ASSUMPTION OF RISK AGREEMENT  
\*\*\*READ BEFORE SIGNING\*\*\***

Organization Name: AXFIT (Adrenaline Xtreme Fitness)

Windsor, ON

Participant Name: \_\_\_\_\_  
Print Name

In consideration of being allowed to participate in any way in the program, related events and activities, and use of equipment, I the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death.
2. **I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS**, both known and unknown, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES** or others, and assume full responsibility for my participation.
3. I willingly agree to comply with terms and conditions for participation. If 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.
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, **HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS (AXFIT) Adrenaline Xtreme Fitness** its officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event (RELEASEES), from any and all claims, demands, losses, and liability arising out of or related to any **INJURY, DISABILITY OR DEATH** I may suffer, or loss or damage to person or property, **WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE**, to the fullest extent permitted by law.

**Health Statement**

I will notify **(AXFIT) Adrenaline Xtreme Fitness** ownership or employees if I suffer from any medical or health condition that may cause injury to myself, others, or may require emergency care during my participation.

**Media Statement**

By signing below, I hereby grant and convey to **(AXFIT) Adrenaline Xtreme Fitness** all right, title and interest in and to record my name, image, voice, or statements including any and all photographic images and video or audio recordings made by **(AXFIT) Adrenaline Xtreme Fitness**

**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.**

X \_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Age

\_\_\_\_\_  
Date