

BUCK'S SPORT BARN LIABILITY AGREEMENT

PARTICIPANT INFORMATION:

Name: _____

DOB: _____ Gender: M / F

Home Address: _____

City, State Zip: _____

PRIMARY CONTACT INFORMATION:

Parent/Guardian: _____

Cell Phone: _____

*E-mail Address: _____

Emergency Contact: _____

Relationship to Child: _____

Cell Phone: _____

I attest that I understand the nature of circus arts and children's activities at Buck's Sport Barn (hereinafter referred to as "activity") and that **I am in good health**, and in proper physical condition to participate in such activities. I acknowledge that if I believe any conditions are unsafe, I will immediately discontinue participation in the activity. I fully understand that this activity involves risk of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the activity, the conditions in which the activity takes place, and that there may be other risks either not known to me or not readily foreseeable at this time. In consideration of the services of The Imperial Opa Circus LLC and Buck's Sport Barn and for allowing my participation in activities at Buck's Sport Barn, I agree that I fully understand, accept and assume all risks and all responsibility for injuries, losses, expenses, costs, and damages I may incur arising out of, in connection with, or as a result of my participation in the activity.

I hereby assume the risk, release, discharge, and covenant not to sue The Imperial Opa LLC, Buck's Sport Barn, their respective owners, administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the activity takes place, (each considered one of the "RELEASEES" herein) for all liability, claims, demands, losses, expenses or damages caused or

**We do not sell or disclose contact information. We respect your inbox and will only contact you about Buck's Sport Barn events.*

alleged to be caused in whole or in part by the negligence of the Releasees, the condition of the premises, the conduct of others, illness, or otherwise, including negligent rescue efforts. I further agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, defend, save, and hold harmless each of the Releasees from any loss, liability, damage, expense or cost, which any may incur as the result of such claim.

I certify that I have adequate insurance to cover any injury, illness or damage I may suffer or cause while participating, or else I agree to bear the costs of such injury, illness or damage myself. I further certify that I assume the risk of any medical or physical condition I may have.

I agree that if I am deemed to be disruptive to the event or activity, I will be instructed to sit out to ensure my safety and the safety of other participants. If the disruption continues, my parent will be required to take me off the premises and no refund will be given.

I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used without compensation to me for any legitimate purpose (publicity, marketing, etc.) by Buck's Sport Barn, event holders, producers, organizers, and assigns.

The assumption of risk, waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it voluntarily, freely and without inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this Agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect. I have had sufficient opportunity to read this entire document. I have read and understand it. I agree to be bound by its terms.

Date: _____

Print Name of Participant _____ Age _____

Signature of Participant _____

PARENT'S OR GUARDIAN'S ADDITIONAL INDEMNIFICATION (Must be completed for participants under the age of 18)

In consideration of _____ (print minor's name) ("Minor") being permitted by The Imperial Opa, LLC and Buck's Sport Barn to participate in its activities and to use its equipment and facilities, I agree that I have read and approve of all the terms of this Release Agreement and the information that my child has provided herein. I further agree to indemnify and hold harmless The Imperial Opa LLC, Buck's Sport Barn, and their owners, operators and employees from any and all claims which are brought by, or on behalf of Minor or Minor's family members, and which are in any way connected with use of Buck's Sport Barn facility or participation in activity by Minor.

Parent or Guardian:

Print Name: _____ Date: _____

Signature of Parent or Guardian _____