

MINOR
ERED DUATH
BELEGARTH MEDIEVAL COMBAT SOCIETY
located in Provo, UT
RELEASE/INDEMNIFICATION AND COVENANT NOT TO SUE

Name of Participant:

Birthdate:

I, _____, request permission from Ered Duath Medieval Combat Society (hereafter ED) on behalf of my minor child to participate as a member of ED and to participate in any activity, event, tournament, contest or meeting that ED participates in, sponsors, attends, or supervises. By my signature below I acknowledge that this participation carries an inherent risk of physical injury to my minor child. I knowingly and voluntarily assume the risk of those injuries, regardless of severity, which may occur as a result of my minor child's participation. I realize that my minor child's participation is voluntary and in exchange for the privilege of participating, I CERTIFY THAT I AM FULLY RESPONSIBLE FOR MY MINOR CHILD'S PARTICIPATION AND TO THE FULLEST EXTENT PERMITTED BY LAW I HEREBY FOREVER RELEASE, WAIVE, COVENANT NOT TO SUE AND DISCHARGE ED, THE OWNER OF ANY PREMISES WHERE ANY ED ACTIVITY, EVENT, TOURNAMENT, CONTEST OR MEETING OCCURS, AND ANY OTHER MEMBER OF ED, INDIVIDUALLY, FROM ANY AND ALL LIABILITY, CLAIMS, DEMANDS, DAMAGES, ACTIONS, AND CAUSES OF ACTION, ARISING OUT OF OR RELATED TO ANY LOSS, DAMAGE, OR INJURY, INCLUDING DEATH, CAUSED BY ANY REASON WHATSOEVER, INCLUDING NEGLIGENCE, THAT MY MINOR CHILD MAY SUSTAIN, OR THAT MY OWN OR MY MINOR CHILD'S PROPERTY MAY SUSTAIN, WHILE PARTICIPATING IN ANY ACTIVITY, EVENT, TOURNAMENT, CONTEST OR MEETING THAT THE ED PARTICIPATES IN, SPONSORS, ATTENDS OR SUPERVISES. Further, I understand that this waiver of liability has no terminal date and that once completed will be considered binding for all participation with ED. I certify that I am duly aware of the risks and hazards inherent upon participating in any activity, event, tournament, contest or meeting of the ED, and I elect voluntarily for my minor child to participate, knowing that participation requires physical contact by others to my minor child's person and, knowing that such participation may become hazardous and dangerous, I voluntarily assume all risks of loss, damage, or injury, including death, that my minor child or my own or my minor child's property may sustain while participating in any activity, event, tournament, contest, or meeting that ED participates in, sponsors, attends or supervises. I understand that ED strongly recommends that I maintain medical insurance and that I am solely responsible for any and all medical expenses that my minor child may incur as a result of my minor child's participation. This release shall be binding upon my distributees, heirs, next of kin, executors and administrators and my minor child's guardians, distributees, heirs, next of kin, executors and administrators.

In signing the foregoing release, I acknowledge and represent:

(a) I have read the above release, understand it, and sign voluntarily on behalf of myself and my minor child;

(b) I am over 18 years of age and of sound mind and am the legal parent or guardian of the minor child named above;

(c) I certify that my minor child is in good health and has no physical or mental defects known or unknown to the appropriate representative of ED that would endanger or harm my minor child or others while participating in any activity, event, tournament, contest or meeting that ED participates in, sponsors, attends, or supervises.

Signature of Parent or Legal Guardian

Full Name of Parent or Legal Guardian

Date

E-Mail

Phone

Address

City, State, and Zip

Name of person to contact in emergency

Emergency phone number