GENERAL LIABILITY RELEASE FORM

SUMMIT LEARNING CENTER (Summit Learning Centers, LLC)

This General Liability Release Form ("Release") is made and entered into as of the date signed below by the undersigned participant and/or parent or legal guardian (if applicable) ("Participant" or "Guardian"), in favor of Summit Learning Center (Summit Learning Centers, LLC), its officers, directors, employees, agents, volunteers, and affiliates (collectively, "SLC").

1. ASSUMPTION OF RISK

I, the undersigned, acknowledge that participation in activities at Summit Learning Center (Summit Learning Centers, LLC) may involve risks of injury, illness, or damage to personal property. I voluntarily assume full responsibility for any risks associated with my or my child's participation, including but not limited to accidents, falls, equipment-related injuries, or other unforeseen incidents.

2. RELEASE AND WAIVER OF LIABILITY

In consideration for being permitted to participate in any program, class, or activity at Summit Learning Center (Summit Learning Centers, LLC), I hereby release, waive, discharge, and hold harmless Summit Learning Center (Summit Learning Centers, LLC), its owners, instructors, employees, volunteers, and affiliates from any and all liability, claims, demands, or causes of action that may arise from participation, whether caused by negligence or otherwise.

3. MEDICAL TREATMENT AUTHORIZATION

I authorize Summit Learning Center (Summit Learning Centers, LLC) to seek emergency medical treatment for me or my child in the event of an accident or illness. I understand that I am responsible for all medical costs incurred.

4. INDEMNIFICATION

I agree to indemnify and hold harmless Summit Learning Center (Summit Learning Centers, LLC) from any claims, damages, losses, or expenses (including attorney's fees) that arise from my or my child's participation in activities.

5. PHOTOGRAPHY & MEDIA RELEASE

I grant Summit Learning Center (Summit Learning Centers, LLC) permission to take photographs and videos of me or my child during activities for promotional, educational, or social media purposes. I understand that no compensation will be provided. If you do not consent to this you must notify us in writing.

6. ACKNOWLEDGMENT OF POLICIES

I have read and agree to comply with all rules and policies set forth by Summit Learning Center (Summit Learning Centers, LLC). I understand that failure to follow these policies may result in my or my child's removal from activities without refund.

7. SEVERABILITY

If any provision of this Release is found to be invalid or unenforceable, the remaining provisions shall remain in full force and effect.

8. BINDING EFFECT

This Release shall be binding upon me, my heirs, assigns, and legal representatives.

Participant's Name: _____

Date of Birth (if minor): _____

Parent/Guardian Name (if applicable): _____

Address: _____

Phone Number: _____

Emergency Contact Name & Phone Number: _____

Signature (Participant or Guardian if under 18): _____

Date: _____

By signing this form, I acknowledge that I have read, understood, and voluntarily agree to this Release of Liability.