



### Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement

Name of the Activity or Event: Speed, Agility Training      **Date of Activity:** 1-2, 1-9, 1-16, 1-23,  
1-30, 2-6, 2-13, 2-20, 2-27, 3-6

**Cost:** \$150 (10 Sessions)      **Time:** 7pm – 8pm      **Location:** HPRHS Aux Gym

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING AND/OR VOLUNTEERING IN THIS ACTIVITY OR EVENT, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault. I certify that I am physically fit, have sufficiently prepared or trained for participation in the activity or event, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity or event. I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity or event in which I may participate, and that it will govern my actions and responsibilities at said activity or event. In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

- (A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind.
- (B) I INDEMNIFY, HOLD HARMLESS, AND RELEASE the High Point Regional High School, Board of Education, Explosive Speed Performance, its officers, coaches, or owners from any and all liabilities or claims made as a result of participation in this activity or event, whether caused by the negligence of release or otherwise.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

_____	_____	_____	_____
Participant's Name	Age	Signature (Parent or Guardian must sign if under 18)	Date
_____	_____	_____	_____
Print Name	Signature of Parent or Guardian	Date	