

N.E.W. Nations Gym Release of Liability Form

Name of Participant: _____

Date of Birth: _____

Date: _____

I, the undersigned, hereby acknowledge and agree to the following terms and conditions before utilizing the facilities at N.E.W. Nations Gym located at 514 Williams St, Marlin, TX, United States, Texas:

1. **Assumption of Risk:** I acknowledge that participation in basketball activities at N.E.W. Nations Gym involves inherent risks, including but not limited to, bodily injury, illness, or death. I voluntarily assume all such risks.
2. **Health and Fitness:** I hereby certify that I am physically fit to participate in basketball activities at N.E.W. Nations Gym. I acknowledge that it is my responsibility to consult with a physician prior to engaging in any physical activity if I have any concerns about my health or ability to participate.
3. **Release of Liability:** In consideration for being permitted to use the facilities at N.E.W. Nations Gym, I hereby release, waive, discharge, and covenant not to sue N.E.W. Nations, its owners, employees, agents, and affiliates from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including but not limited to bodily injury, illness, or death, that may be sustained by me while participating in basketball activities at N.E.W. Nations Gym.
4. **Indemnification:** I agree to indemnify and hold harmless N.E.W. Nations, its owners, employees, agents, and affiliates from any and all liabilities, damages, costs, or expenses, including reasonable attorney fees, arising from or related to my use of the facilities at N.E.W. Nations Gym.
5. **Emergency Medical Treatment:** In the event of an emergency, I authorize N.E.W. Nations, its owners, employees, agents, and affiliates to obtain medical treatment for me if deemed necessary. I understand that I am responsible for any medical expenses incurred as a result of such treatment.
6. **Photography and Publicity:** I consent to the use of my likeness, including photographs and/or videos, for promotional purposes by N.E.W. Nations without compensation.

I have read this release of liability form and fully understand its contents. I voluntarily agree to its terms and conditions.

Participant's Signature: _____

Date: _____

Parent/Guardian Signature (if participant is under 18 years old): _____

Date: _____